

trends in medical practice

**An analysis
of the distribution
and characteristics of
medical college
graduates**

1915-45

**H. G. WEISKOTTEN
and
MARION E. ALTENDERFER**

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Table of Contents

TRENDS IN MEDICAL PRACTICE	1
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TABLES:

Table 1	16	Table 20	63
Table 2	19	Table 21	65
Table 3	20	Table 22	67
Table 4	23	Table 23	68
Table 5	24	Table 24	70
Table 6	28	Table 25	71
Table 7	32	Table 26	73
Table 8	36	Table 27	77
Table 9	40	Table 28	78
Table 10	41	Table 29	79
Table 11	45	Table 30	81
Table 12	46	Table 31	82
Table 13	48	Table 32	84
Table 14	51	Table 33	85
Table 15	54	Table 34	86
Table 16	55	Table 35	87
Table 17	56	Table 36	88
Table 18	57	Table 37	89
Table 19	61	Table 38	90
QUESTIONNAIRE USED IN 1945 STUDY	91		

Table of Contents

Chapter I. The History of the United States	1
Chapter II. The Constitution of the United States	15
Chapter III. The Federal Government	35
Chapter IV. The State Governments	55
Chapter V. The Local Governments	75
Chapter VI. The Judiciary	95
Chapter VII. The Executive	115
Chapter VIII. The Legislative	135
Chapter IX. The Finance	155
Chapter X. The Education	175
Chapter XI. The Religion	195
Chapter XII. The Social	215
Chapter XIII. The Literature	235
Chapter XIV. The Art	255
Chapter XV. The Science	275
Chapter XVI. The Industry	295
Chapter XVII. The Commerce	315
Chapter XVIII. The Transportation	335
Chapter XIX. The Communication	355
Chapter XX. The Defense	375
Chapter XXI. The Foreign Relations	395
Chapter XXII. The International Law	415
Chapter XXIII. The International Trade	435
Chapter XXIV. The International Relations	455
Chapter XXV. The International Cooperation	475
Chapter XXVI. The International Organization	495
Chapter XXVII. The International Community	515
Chapter XXVIII. The International System	535
Chapter XXIX. The International Order	555
Chapter XXX. The International Peace	575
Chapter XXXI. The International Justice	595
Chapter XXXII. The International Security	615
Chapter XXXIII. The International Stability	635
Chapter XXXIV. The International Prosperity	655
Chapter XXXV. The International Well-being	675
Chapter XXXVI. The International Happiness	695
Chapter XXXVII. The International Unity	715
Chapter XXXVIII. The International Harmony	735
Chapter XXXIX. The International Balance	755
Chapter XL. The International Equilibrium	775
Chapter XLI. The International Stability	795

TRENDS IN MEDICAL PRACTICE

An analysis of the distribution and characteristics of medical college graduates, 1915 - 1945

H. G. Weiskotten and Marion E. Altenderfer

THIS REPORT is based on surveys of graduates of American medical colleges of every fifth class from 1915 through 1945. The results of the surveys of 1915, 1920, 1925, 1930, 1935 and 1940 graduates were published in the *Journal of the Association of American Medical Colleges*. (1, 2, 3, 4) Data for all the studies were obtained from questionnaires sent to each graduate of the specified year some years after graduation.

These surveys were originally planned to collect information six years after graduation. By that time, it was felt, the graduates would be more or less established in their careers. However because of various circumstances, including the demands of the military forces and the development of the graduate training program, only the classes of 1920, 1925 and 1930 were surveyed six years after graduation. The graduates of 1915, surveyed at the same time as the 1920 graduates, were studied after 11 years; the graduates of 1935 after 15 years; the graduates of 1940 after 10 years; and the graduates of 1945 after nine years. These varying intervals between graduation and time of the survey must be borne in mind in interpreting some of the findings which are closely related to the length of time since graduation.

The content of the questionnaires has changed from survey to survey but much information has been obtained from all groups of graduates. A copy of the questionnaire used for the study of 1945 graduates is shown on page 91. A total of 28,783 questionnaires have been sent out to the graduates of the seven classes studied. Of this number, 21,110 or 73 per cent were returned. Almost 74 per cent of the 1945 graduates returned questionnaires. The number of questionnaires sent out and the number and percentage returned by the graduates of each medical college are shown in Table 1. The surveys for 1925-1940 included graduates of Canadian medical colleges. It was decided not to survey these graduates in the

current study. Wherever possible the Canadian graduates have been omitted in this presentation from the data for the earlier years. In a few instances, data for 1925 and 1930 include Canadian graduates.

Age at Graduation

The proportion of graduates at both the upper and lower ends of the age scale have decreased over the years (Table 2). The trends have not been consistent however. Many of the fluctuations can be explained by the dislocations in the educational pattern caused by World Wars I and II. A factor which has tended to raise the average age at graduation is the increasing number of medical colleges which require four years of college for admission. The sharp increase in the proportion of graduates in the 19-23 age group in the 1945 class is caused to some extent by the wartime accelerated program which resulted in many students being admitted to medical school after two years of premedical preparation and completing their medical education in three years.

Since the great majority of graduates were under 29 years of age at graduation, these were tabulated by single years of age where the data were available. The distributions are as follows:

<i>Age in years</i>	<i>Percent of graduates</i>		
	<i>1935</i>	<i>1940</i>	<i>1945</i>
21.....	0.1	¹	0.1
22.....	0.8	0.6	2.4
23.....	5.3	3.8	14.4
24.....	15.0	13.9	33.2
25.....	22.9	25.2	26.6
26.....	20.7	24.7	8.2
27.....	13.7	12.1	4.7
28.....	6.7	6.5	2.9

¹Less than .05 per cent.

Place of Practice

The great majority of the graduates of American medical colleges were found to be practicing in Continental United States. The proportion ranges from 99 per cent for 1925 graduates to 96.8 per cent for the class of 1945. Only a handful of graduates, 29 of the 1945 class, were practicing in the Territories. A few graduates of each class were practicing in Canada or some other country. Out of the 1945 class, 74 failed to report place of practice but 68 of these were in the Armed Forces.

The distribution of 1945 graduates practicing in the United States is shown by geographic division and state in Table 3. For comparison the

distribution of the 1953 population is also shown. The geographic divisions are given in the order of per capita income which is shown in the last column of the table. The figures labeled "private practice" in this and subsequent tables include, in addition to those who indicated private practice on the questionnaire, all physicians engaged in group practice whether on a salaried, partnership or fee basis.

Four divisions, Pacific, New England, Mountain and West South Central attracted more 1945 graduates in private practice than would be expected on the basis of population distribution. Per capita income does not seem to be as important a factor as might be expected since two of the four divisions with higher percentages of graduates than of population have lower than average per capita incomes. The Middle Atlantic division, with the highest per capita income, had slightly less than its share of graduates in private practice. The picture was somewhat different for the 1935 and 1940 graduates. Only one division which had a higher per cent of graduates than of population had lower than average per capita income.

Size of Community of Practice

The greatest need for physicians in the United States has for some years been in the smaller communities and rural areas. Some medical schools have tried to persuade more of their graduates to locate in the smaller places. Several states have offered various inducements to attract young physicians to rural areas. Data from the surveys of the classes of 1930-1945 may be used to study where medical college graduates are practicing from 6 to 15 years after graduation.

In order to eliminate from the analysis graduates serving full time on the staffs of hospitals and institutions located in rural areas, the data in the next two tables have been limited to physicians in private practice. Table 4 shows the distribution of 1930-1945 graduates in private practice in various size communities and Table 5 shows similar distributions of 1945 graduates of each school.

The proportion of graduates practicing in the largest cities has decreased consistently from the 1930 class to that of 1945. The proportion in cities between 25,000 and 500,000 has steadily increased. The proportion in places under 25,000 decreased from the 1930 class to the 1940 class but then increased with the 1945 class. It would appear that the trend of physicians away from the smallest communities has been reversed to some extent.

The distribution of the total population in 1950 by size of community shows that cities of 500,000 and over have 18 per cent of the people while communities with less than 5,000 persons account for 46 per cent of the population. The largest communities obtained 20 per cent of the 1945 graduates while those under 5,000 obtained only 14 per cent. It must be remembered however that many geographic and other factors influence the availability of physicians' services and therefore these comparisons between proportion of population and proportion of graduates should be interpreted with caution.

The great variation among medical colleges in the proportion of graduates in private practice in various size communities can be seen in Table 5. Three medical colleges, Chicago Medical School, Howard, and New York Medical College have 50 per cent or more of their 1945 graduates who are in private practice in cities of 500,000 or more. Four colleges, Bowman Gray, Colorado, Georgia, and Vermont have no 1945 graduates in private practice in communities of this size. At the other end of the scale, seven schools (Baylor, George Washington, Georgia, Kansas, Medical Evangelists, Oklahoma and Utah) have 25 per cent or more of their graduates in communities of less than 5,000 and six have no graduates in these small communities.

Factors Affecting Place of Practice

Many factors influence choice of place of practice. Later studies should give some information as to the influence of certain medical school programs, such as scholarships and rural preceptorships, upon the number of graduates locating in the smaller communities. Most of these programs have been initiated since 1945. However, one school has required rural preceptorships of its fourth-year students for about 30 years and still is not one of the schools having the highest percentage of its graduates locating in the smaller communities. The 1945 graduates were asked to indicate the most important reasons for locating in their present place of practice. A detailed analysis of their replies to this question will be presented elsewhere. It is possible to relate place of practice to the place of residence before entering medical college, to the location of the medical college attended, and to the place an internship or residency was served. An analysis of these relationships follows.

Location of medical college. Table 6 shows the proportion of the graduates of each medical college in private practice who are practicing in the same city as the medical college attended. The average for all schools has decreased somewhat from 1930 to 1945. There are a few schools which consistently show a higher than average proportion in the same city and others which show a low proportion. Buffalo, Cincinnati, Long Island, Loyola, New York Medical College, New York University, Pittsburgh, and Wayne have considerably more than the average proportion of graduates practicing in the same city for each of the four classes. All of these schools are located in large cities. Most of the schools with low proportions of graduates practicing in the same city are located in small cities which could not absorb nearly as high proportions of graduates. However there are exceptions. Of the five medical colleges located in New York City, Columbia and Cornell have average or less than average proportions of 1945 graduates practicing in New York. All of the schools in New York City have lower proportions of their 1945 graduates than of their 1930 graduates practicing in that city.

Of the three municipally supported medical colleges, Cincinnati and Wayne have fairly high proportions of graduates practicing in the same city as the medical college. For 1945 graduates of Wayne this proportion

decreased sharply from that for earlier classes. For the third municipally supported college, Louisville, the proportion practicing in the same city has more than doubled from the 1930 to the 1945 class but is still only slightly over the average for all schools.

When we extend the analysis from city of practice to state of practice, the decrease between the 1930 and 1945 classes in the proportion practicing in the same place as the medical school is more marked. Table 7 shows the proportion practicing in the same state for each school and for total public and private schools. Although the proportions have decreased for both groups, the decrease has been much greater for the private schools.

Some of the private schools consistently show higher proportions of graduates practicing in the same state than many publicly supported schools. Albany, Buffalo, Chicago Medical School, Pittsburgh, Stanford, Syracuse and Western Reserve have higher proportions than the average for the public schools for each of the four classes. On the other hand, Maryland, Vermont, Medical College of Virginia and the University of Virginia have lower proportions practicing in the same state than many private schools.

Place of prior residence. Table 8 shows the proportion of 1945 graduates of each medical college who are in private practice in the same city, the same state and the same division as they lived in before entering medical college. On the average, three out of 10 graduates are practicing in their "home towns," but the range is from 5 per cent for graduates of Medical Evangelists and 8 per cent for graduates of Wisconsin to over 50 per cent for graduates of Chicago Medical School and Georgetown.

Another three out of 10 graduates are practicing in another city in their home state, making six out of 10 in the home state. Again there is tremendous variation from school to school. The University of Chicago, with 26 per cent of its graduates practicing in Illinois, has the lowest proportion; Southern California has the highest, 91 per cent.

That medical college graduates tend to practice in the same part of the country as they lived before entering medical college is shown by the fact that 71 per cent are practicing in the same geographic division as their place of prior residence. With two exceptions, the University of Chicago (32 per cent) and Nebraska (44 per cent) over half the graduates of each school are practicing in the same geographic division as that in which they lived before entering medical college.

At this point it may be well to study where medical colleges are drawing students from in relation to the location of the schools. Table 9 shows that for both public and private schools there has been little change in the proportion of graduates who lived in the same city as the medical college. For private schools, this has also been true of the proportion who lived in the same state. For public schools the proportion who lived in the same state increased from 76 per cent to 81 per cent from the 1935 class to the 1945 class. This is probably a reflection of an increasing tendency for state-supported schools to restrict admissions to residents of the state.

The data for individual medical colleges show an enormous difference in the proportion of graduates whose prior residence was in the same city, same state or same division as the medical college (Table 10). All of the medical colleges for which more than half of the graduates lived in the same city as the school are located in cities of more than half a million population. Of the 27 public schools, 15 drew 90 per cent or more of their students from the same state. Only five of the 43 private schools drew 90 per cent or more graduates from the state. Current data in regard to the state of origin of students are published annually in the Education Number of the *Journal of the American Medical Association*.

The area from which medical colleges drew their students is very large for some schools, very small for others. In addition to those 20 schools which drew 90 per cent or more of the graduates from the state, there are six schools which drew this high proportion from the geographic division in which the school is located. At the other extreme are three schools (Georgetown, Meharry and St. Louis) which drew less than 25 per cent of their students from the division in which the school is located.

Relative importance of various factors. In an effort to evaluate the relative effect of the location of the medical college as compared with place of prior residence and with place internship was served on place of practice, Table 11 was developed. For the 1935 and 1940 graduates, place of internship was not requested. However, about 1,000 graduates volunteered this information. Data on place of internship were requested of the 1945 graduates and all but a few answered this question. It would appear that place of prior residence was a much more potent factor than location of medical college or place of internship in determining the place of practice of all three classes. Whereas 28 per cent of the 1945 graduates are practicing in the same city as their prior residence, only 20 per cent are practicing in the city in which they served an internship and 18 per cent are practicing in the same city as the medical college attended.

Table 11 also shows that the proportion of graduates practicing in a different place than internship, medical college or prior residence has increased slightly. This is probably a reflection of the dislocating effect of World War II. Many physicians had an opportunity to live in different parts of the country while serving in the Armed Forces and some found places they preferred to their home communities.

Both place of internship and place of residency were obtained for 1945 graduates. Table 12 shows distributions of the graduates with residency training who are practicing in the same city and the same state as one, two, three or four of the other places. Almost 7 per cent of the graduates were practicing in the same city as their prior residence, medical college, internship and residency. The largest groups of graduates (9.3 per cent) were practicing in the same city as prior residence only and in the same city as residency training only. About half the graduates were practicing in a different city than any of the other factors.

When we consider state of practice, only one-fourth of the graduates were practicing in a different place than any of the four factors. Almost

another one-fourth were practicing in the same state as all four factors. If the various groups shown in Table 12 are added together to show the total practicing in the same city or state as one factor whether or not any of the other factors is the same, it will be found that place of residency training is the most important and place of prior residence the next most important factor

It was noted above that there is great variation among medical colleges in the proportion of graduates practicing in various size communities. Since place of prior residence has been found to be an important factor in determining place of practice, it may be useful to examine the distribution of the graduates of each school by size of place of prior residence. Table 13 shows the tremendous variation among the schools. Thirteen medical colleges had no graduates who lived in cities of 500,000 or more population before entering medical college, but for 10 other medical colleges more than half of the graduates came from these large cities. Only one medical college had no graduates from places under 2,500 population but 31 others had less than 10 per cent from these small places. On the other hand, Georgia had 35 per cent and Iowa 38 per cent of their graduates from the smallest communities.

Since recruitment of physicians for small towns and rural areas is considered one of the most important problems in the distribution of physicians today, it may be of interest to study the relationship between the proportion of graduates practicing in small communities and the proportion which came from the same size group. Table 14 shows these data for each medical college for communities of less than 25,000 population. Thirty-five per cent of all graduates in private practice are practicing in communities of less than 25,000 population while slightly more came from communities in this size group. As a group, the public schools draw a higher proportion of students from small communities and contribute comparatively more physicians to them than do the private schools.

Nine of the public schools and 20 of the private schools have more graduates practicing in places under 25,000 than graduates whose prior residence was in these communities. In most instances the differences are small but for the University of California, Wayne, Boston, George Washington, Loyola, Medical Evangelists, New York University and Southern California there were considerably more graduates practicing in communities under 25,000 than came from such places.

A cross tabulation of graduates by size of community of practice vs. size of community prior residence reveals some interesting relationships. Although only 25 per cent of the 1945 graduates in private practice came from cities of 500,000 or more population, this proportion rises to 64 per cent for graduates practicing in this size city (Table 15). Only 12 per cent of all graduates came from the smallest communities but 32 per cent of those practicing in places of less than 2,500 came from such places. This cross tabulation can be examined from another point of view. Twenty per cent of all 1945 graduates in private practice are practicing in cities of 500,000 or more population while the figure for graduates who came

from these large cities is 51 per cent (Table 16). Places of less than 2,500 have 9 per cent of all graduates but 24 per cent of graduates who came from these small places are practicing there.

Type of Practice

Table 17 shows the number and percentage of graduates of each class studied who were in general practice, in general practice with special attention to a specialty, or who had limited their practice to a specialty at the time they were surveyed. In comparing the data for the various classes, it must be remembered that the time elapsed between graduation and the date of the survey varied. Since until recently many physicians started practice as general practitioners, then began to give special attention to a specialty, and finally limited their practice, the greater the interval between graduation and the time of survey the more likely it was to find limited specialists. The graduates of 1920, 1925 and 1930 were studied six years after graduation; 1945 graduates, 9 years; 1940 graduates, 10 years; 1915 graduates, 11 years; and 1935 graduates, 15 years after graduation.

In spite of this difference in length of time in practice, certain trends can be seen in the data in the table. After 10 years, 64 per cent of the 1940 graduates had limited their practice while only 56 per cent of the 1935 graduates had limited after 15 years. The trend toward specialization would appear to be even more marked if the length of time in practice had been the same for all classes. The proportion of graduates in general practice has remained about the same except for the 1930 and 1945 graduates. The increase in the proportion of limited specialists has been at the expense of those giving special attention to a specialty. This is probably a result of changes in the method of becoming a specialist. With the complexity of modern medicine and the long period required for specialty training, more physicians are going into specialty training directly after internship or after a few years of general practice. They are less likely to spend some years in general practice giving special attention to a specialty before limiting practice.

In Table 18 the proportions of limited specialists found among the graduates of each medical college in each of the seven surveys are shown. For all schools, there has been a steadily increasing proportion of limited specialists for each class since 1930. Individual medical colleges show considerable variation from the general trend. Nine schools show a somewhat lower proportion of 1945 graduates who have limited practice than of 1940 graduates. Six schools—Cornell, Harvard, Johns Hopkins, Michigan, Northwestern and the University of Virginia—have higher than average proportions of graduates who are limited specialists for each of the classes studied.

Size of community of practice. Table 19 shows the distribution of graduates in private practice by type of practice and size of community. As would be expected, the highest proportion of limited specialists is in the large cities; the highest proportion of general practitioners and those giving special attention to a specialty is in the smaller communities. For the 1935 and 1940 graduates, the highest proportion of limited specialists is in

cities of 500,000 or more population; for 1945 graduates the proportion is highest in cities between 100,000 and 500,000 persons. Another difference between the distribution for 1945 graduates and those for earlier classes is the proportion of limited specialists in places of less than 25,000 population—22 per cent for 1945 compared with 15 per cent for 1935 and 1940. This would seem to indicate a trend away from further concentration of specialists in the largest cities.

While the proportion of limited specialists who are practicing in cities of 500,000 or more has decreased from 33 per cent to 24 per cent, the actual number of limited specialists in these cities has increased. On the other hand, the number of graduates giving special attention to a specialty has decreased so much that a drop from 17 to 15 per cent in the proportion in the largest cities is based on a drop in actual numbers from 88 to 31.

Table 20 indicates the number and percentage of 1925, 1930, 1935, 1940 and 1945 graduates in each city of 500,000 or more population who have limited their practice to a specialty. While for all graduates the proportion of limited specialists increased from 34 per cent for 1925 graduates to 74 per cent for 1945 graduates, the corresponding figures for graduates practicing in cities of 500,000 or more are 40 per cent and 83 per cent. For individual cities there are some irregularities in the trend towards specialization. Five cities—Boston, Buffalo, Detroit, Minneapolis, and St. Louis—have lower proportions of limited specialists among 1945 graduates than among 1940 graduates. The highest proportion of specialists among 1945 graduates is 93 per cent in Cleveland and New Orleans; the lowest is 51 per cent in St. Louis.

Size of community of prior residence. Since place of prior residence was found to be a most important factor in determining size of community of practice for all graduates in private practice, it is of interest to study the distribution of graduates who came from various size communities by type of practice. Table 21 shows that three-fourths of the 1945 graduates who came from cities of 25,000 or more population have limited their practice to a specialty. For those whose prior residence was in places under 25,000, only 60 per cent are limited specialists.

Specialty. At the time these studies were initiated a rather crude classification of specialties was employed in view of the lack of recognition of many more or less limited fields of practice. For purposes of comparison an attempt has been made to fit the data for all years studied into this original classification. The results of this effort are shown in Table 22. Some marked trends may be observed. The proportion of specialists in eye, ear, nose and throat has decreased steadily from 22 per cent of the 1915 graduates to six per cent of the 1945 graduates. With minor fluctuations, the proportions specializing in genito-urinary diseases, public health and industrial medicine have also decreased. Almost one-fourth of the limited specialists among the 1945 graduates are practicing internal medicine—the highest proportion for this specialty among all classes studied. While several other specialists show a higher proportion of 1945 graduates than of 1915 graduates, there are no clear trends.

A more detailed classification by presently recognized specialties is available for 1935, 1940 and 1945 graduates (Table 23). Although some of the numbers are small, there seem to be some fairly marked trends. The proportions of graduates limiting practice to allergy, cardiovascular disease, neuropsychiatry, proctology, pulmonary disease and urology have declined steadily. On the other hand, the proportions limiting practice to anesthesiology, internal medicine, neurological surgery, pathology and pediatrics show steady increases.

Method of Practice

The greatest change in the method of practice is the drop in the proportion of graduates in individual practice (Table 24). Part of this drop is compensated for by an apparent increase in those reporting partnerships. For 1935 and 1940 graduates, the questionnaire did not list partnership as one of the choices. Some physicians filled in partnership under "other (specify)." The 1945 questionnaire had partnership as one of the choices. The percentages for individual practice, partnership and group practice combined show a decline from 84 per cent of the 1935 graduates to 74 per cent of the 1945 graduates.

There has been a considerable increase in the proportion of graduates engaged in teaching or research, in residencies and fellowships, and in other hospital or clinic positions. The proportions in the Armed Forces and other Federal governmental positions has also increased somewhat. Graduates employed in state or local health departments, in hospital administration, and industrial practice have decreased in both number and proportion.

In Table 25, 1945 graduates are shown by method and type of practice. The proportion of those in individual practice is 70 per cent for general practitioners but drops to 42 per cent for limited specialists. The proportion in partnerships is about the same for the different types of practice. Most of the other methods of practice show the highest proportion among limited specialists.

The proportion of graduates of each medical college in 1930, 1935, 1940 and 1945 who are in private practice is shown in Table 26. The overall proportion of graduates in private practice has decreased slightly. For many medical colleges, the proportion of graduates in private practice has changed very little from the 1930 to the 1945 class. For others there is a decided trend either towards or away from private practice. Ten medical colleges—Albany, Boston, Columbia, Howard, Long Island, Meharry, New York Medical College, New York University, Rochester and Vermont—show marked decreases in the proportion of graduates in private practice. Three medical colleges—Arkansas, Georgia and Vanderbilt—show marked increases in the proportion in private practice.

The distribution of graduates in private and nonprivate practice by type of practice is shown in Table 27 for 1935, 1940 and 1945 graduates. For each class, there are proportionately more general practitioners among those in private practice than among those in nonprivate practice. While

the proportion of limited specialists is higher among those in nonprivate practice for each class, the difference is decreasing.

Salaried Positions

Full-time salaried positions were held by a little over one-fourth of the 1945 graduates in practice (Table 28). This is the highest proportion among the classes studied except for the 1930 graduates. The proportion of graduates with part-time salaried positions has remained about the same. The 1945 figure includes those graduates with nonsalaried part-time positions because the salary status of part-time positions was not asked for.

Table 29 shows the distribution of the graduates of each class studied by the type of full-time position. The proportion in medical school teaching or research has more than doubled. The proportion in hospitals and institutions has fluctuated from class to class but is about the same for the 1945 class as for the 1915 class. There are proportionately fewer in public health, industrial positions and in assistantships. About the same proportion of the 1945 and of the 1915 graduates were employed by the Federal government but between these two classes there were marked fluctuations.

The proportion of limited specialists among graduates with full-time and part-time salaried positions is much higher than among all graduates (Table 30). Those with full-time positions show the highest proportion of limited specialists for each class but the difference between full- and part-time positions is not as great for 1945 graduates as for 1935 graduates.

The distribution by specialty of limited specialists with full- and part-time positions is shown in Table 31 for 1935, 1940 and 1945 graduates. Among graduates of the latter two classes with full-time positions the highest proportion of limited specialists is in internal medicine and the second highest in surgery. This is similar to the distribution of all limited specialists among graduates of these classes. For those with part-time positions, the proportion in internal medicine is very high for all three classes.

Graduate Training

Almost all medical college graduates now serve internships. There seems to be a slight tendency toward mixed or straight internships rather than general or rotating ones especially among those graduates who are giving special attention to or have limited practice to a specialty (Table 32).

There has been little change in the proportion of general practitioners who take residency training—from 30 to 35 per cent of the 1935, 1940 and 1945 graduates in general practice have done so. Among those who are giving special attention to a specialty, the proportion with residency training has increased from 49 per cent to 61 per cent. Among limited specialists, the increase has been from 84 to 97 per cent.

Table 33 shows the distribution of limited specialists by type of graduate training. The increase in the proportion with residency training has been among those with residency training in the specialty which they are practicing rather than in another specialty. The proportion with some

training other than residency has dropped from 12 per cent to two per cent. This is largely caused by the decrease in the proportion of graduates specializing in public health where the usual form of graduate training is a degree from a school of public health rather than a residency.

There is a considerable amount of variation in the length of residency training of the 1945 graduates (Table 34). The most usual length of residency training was between three and four years but a few had six years or more. Table 34 also shows the number of graduates completing residencies in various years. A few had not completed their residency training at the time of the study but indicated that they would do so in 1955 or 1956.

The impact of World War II on the graduate training of the 1935, 1940 and 1945 graduates is shown in Table 35. Most of the 1935 graduates went directly from internships into residencies and 79 per cent completed their training with no interruption. The proportion with no interruption dropped to 42 per cent for 1940 graduates. Many of these graduates went into military service immediately after the completion of internship training. Only 13 per cent of the 1945 graduates finished residency training with no interruption. Although World War II was over by the time most of them graduated, many had been in the ASTP and V-12 programs in medical college and had two or three years of obligated military duty to serve. The usual pattern for this class was to serve an internship and then put in the required time in the Armed Forces before starting residency training.

Ninety-one per cent of the 1945 graduates reported some military service. Of the 400 graduates who reported none, 155 are women. Table 36 shows the distribution of graduates by branch of military service and years of service. Almost two-thirds served in the Army. The usual length of service was two years.

Board Certification

The data on American Board certification shown in Table 37 must be interpreted with caution. One of the usual requirements for certification is practice of the specialty for a certain number of years. The longer the period between graduation and the survey, the more opportunity the graduates had to qualify. The 1935 class was studied 15 years after graduation and shows the highest proportion (62 per cent) of limited specialists who are certified. However, although the 1940 class was studied after 10 years and the 1945 class after nine years, the proportion of certified specialists is higher among the latter group. This indicates a definite trend towards certification. For certain specialties—eye, ear, nose, and throat, laboratory and radiology—the increase in the proportion of certified specialists has been marked. There has been a decrease between 1940 and 1945 in the proportion of specialists in gynecology and obstetrics, and urology who are certified.

The number and percentage distribution of 1935, 1940 and 1945 graduates holding American Board certificates are shown in Table 38. There has been an increase for pediatrics, psychiatry and neurology, radiology,

anesthesiology, plastic surgery, neurological surgery, and thoracic surgery. Decreases are shown for orthopedic surgery, urology, gynecology and obstetrics, otolaryngology and preventive medicine. The proportions for the other boards show little change.

SUMMARY

Practically all graduates of our medical schools practice in the United States.

The differences in the distributions of medical graduates and of total population among the states are not great.

Although there is great variation among the graduates of the different schools, an increasing proportion of graduates are tending to locate in smaller communities.

Many factors influence the choice of place of practice of graduates. Three out of 10 tend to practice in their "home towns" and an additional three out of 10 tend to practice in their home states.

Graduates whose prior residence was in small communities show a greater tendency to locate in such communities than do those from the larger communities.

As a group, the publicly supported schools draw a higher proportion of their students from smaller communities and contribute comparatively more physicians to them than do the private schools.

Prior residence is a more important factor in determining place of practice than location of medical school or internship. Place of residency training is likewise more important than is place of internship.

There is a continuing increase in the proportion of graduates limiting their practice to a specialty—74 per cent of the 1945 graduates.

An increasing number of those limiting their practice are locating in smaller communities. Twenty-two per cent of the 1945 graduates limiting to a specialty are located in communities of less than 25,000 as compared with 15 per cent of the 1935 and 1940 graduates.

Graduates whose prior residence was in the smaller communities are less liable to limit their practice to a specialty.

Only 42 per cent of the 1945 graduates who have limited their practice to a specialty are practicing individually.

The number of graduates occupying full-time salaried positions is increasing. Over 90 per cent of the 1945 graduates occupying such positions have limited their practice to a specialty.

Approximately 30 per cent of the 1945 graduates in general practice had some residency training.

There appears to be a tendency for an increasing number of graduates who limit their practice to a specialty to seek American Board certification.

Military requirements interrupted the residency training of 87 per cent of the 1945 graduates.

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Table 1. Questionnaires returned by graduates of each medical college, 1915-1940 and 1945 classes

	Total			Year of graduation					
				1915-1940			1945		
	Sent	Returned		Sent	Returned		Sent	Returned	
		Number	Percent		Number	Percent		Number	Percent
Medical college									
Total	28,783	21,110	73.3	23,056	16,885	73.2	5,727	4,225	73.8
Arkansas	236	163	69.1	169	123	72.8	67	40	59.7
Medical Evangelists	441	311	70.5	349	250	71.6	92	61	66.3
Southern California	128	98	76.6	75	58	77.3	53	40	75.5
Stanford	268	208	77.6	209	172	82.3	59	36	61.0
California	304	238	78.3	233	181	77.7	71	57	80.3
Colorado	244	196	80.3	189	155	82.0	55	41	74.5
Yale	272	222	81.6	212	173	81.6	60	49	81.7
Georgetown	454	285	62.8	368	225	61.1	86	60	69.8
George Washington	325	233	71.7	254	182	71.7	71	51	71.8
Howard	324	173	53.4	268	138	51.5	56	35	62.5
Emory	439	324	73.8	383	279	72.8	56	45	80.4
Georgia	209	145	69.4	145	102	70.3	64	43	67.2
Chicago Medical School	187	93	49.7	130	63	48.5	57	30	52.6
Northwestern	727	542	74.6	602	453	75.2	125	89	71.2
Loyola	391	243	62.1	313	187	59.7	78	56	71.8

(Cont'd)

Table 1 (Cont'd)

Chicago University	108	89	82.4	51	42	82.4	57	47	82.5
Rush	707	517	73.1	707	517	73.1	180	117	65.0
Illinois	842	564	67.0	662	447	67.5	101	78	77.2
Indiana	550	420	76.4	449	342	76.2	82	64	78.0
Iowa	460	379	82.4	378	315	83.3			
Kansas	319	234	73.4	238	173	72.7	81	61	75.3
Louisville	466	344	73.8	380	287	75.5	86	57	66.3
Louisiana	194	120	61.9	115	66	57.4	79	54	68.4
Tulane	714	510	71.4	571	400	70.1	143	110	76.9
Johns Hopkins	535	435	81.3	457	375	82.1	78	60	76.9
Maryland	576	408	70.8	490	348	71.0	86	60	69.8
Boston	286	206	72.0	221	161	72.9	65	45	69.2
Harvard	829	676	81.5	690	562	81.4	139	114	82.0
Tufts	655	439	67.0	559	375	67.1	96	64	66.7
Michigan	784	606	77.3	651	500	76.8	133	106	79.7
Wayne	346	247	71.4	279	199	71.3	67	48	71.6
Minnesota	634	492	77.6	520	403	77.5	114	89	78.1
St. Louis	648	461	71.1	512	358	69.9	136	103	75.7
Washington	499	386	77.4	399	305	76.4	100	81	81.0
Creighton	319	235	73.7	262	194	74.0	57	41	71.9
Nebraska	441	351	79.6	366	291	79.5	75	60	80.0
Albany	198	154	77.8	158	127	80.4	40	27	67.5
Buffalo	414	305	73.7	342	244	71.3	72	61	84.7
Columbia	662	519	78.4	552	431	78.1	110	88	80.0
Cornell	387	287	74.2	309	221	71.5	78	66	84.6

(Cont'd)

Table 1 (Cont'd)

New York Medical College	318	189	59.4	225	136	60.4	93	53	57.0
New York University	781	571	73.1	661	485	73.4	120	86	71.7
Long Island	606	426	70.3	507	359	70.8	99	67	67.7
Syracuse	264	237	89.8	217	196	90.3	47	41	87.2
Rochester	170	147	86.5	111	100	90.1	59	47	79.7
Duke	176	128	72.7	103	75	72.8	73	53	72.6
Bowman Gray	39	29	74.4	1/	-	-	39	29	74.4
Cincinnati	339	248	73.2	258	188	72.9	81	60	74.1
Western Reserve	389	316	81.2	302	244	80.8	87	72	82.8
Ohio	429	322	75.1	357	269	75.4	72	53	73.6
Oklahoma	285	204	71.6	213	155	72.8	72	49	68.0
Oregon	281	222	79.0	211	165	78.2	70	57	81.4
Hahnemann	524	345	65.8	404	257	63.6	120	88	73.3
Jefferson	974	746	76.6	822	634	77.1	152	112	73.7
Temple	425	288	67.8	300	194	64.7	125	94	75.2
Pennsylvania	832	650	78.1	702	546	77.8	130	104	80.0
Woman's	154	96	62.3	125	81	64.8	29	15	51.7
Pittsburgh	334	263	78.7	257	200	77.8	77	63	81.8
South Carolina	236	176	74.6	188	140	74.5	48	36	75.0
Tennessee	536	370	69.0	400	274	68.5	136	96	70.6
Meharry	304	146	48.0	241	109	45.2	63	37	58.7
Vanderbilt	356	266	74.7	302	222	73.5	54	44	81.5
Southwestern	48	33	68.8	1/	-	-	48	33	68.8
Texas	471	356	75.6	363	270	74.4	108	86	79.6
Baylor	343	246	71.7	305	217	71.1	38	29	76.3

(Cont'd)

Table 1 (Cont'd)

Utah	38	31	81.6	1/	-	-	38	31	81.6
Vermont	224	172	76.8	188	150	79.8	36	22	61.1
University of Virginia	337	257	76.3	273	211	77.3	64	46	71.9
Medical College of Virginia	494	365	73.9	401	293	73.1	93	72	77.4
Wisconsin	209	158	75.6	138	105	76.1	71	53	74.6
Marquette	345	249	72.2	265	186	70.2	80	63	78.8

1/ Not included in study for this year.

* * *

Table 2. Medical college graduates by age at graduation, 1915, 1920, 1925, 1930, 1935, 1940, and 1945 classes

Age group	Year of graduation					
	1915	1920	1925	1930	1935	1940
	Number of graduates					
All ages	1,834	1,947	3,230	3,710	3,186	3,534
19-23	420	346	362	772	198	160
24-28	1,117	1,288	2,196	2,380	2,516	2,912
29-33	212	252	541	360	384	392
34 and over	72	47	99	112	87	70
Not reported	13	14	32	86	1	0
Percentage distribution						
All known ages	100.0	100.0	100.0	100.0	100.0	100.0
19-23	23.1	17.9	11.3	21.3	6.2	4.5
24-28	61.3	66.6	68.7	65.7	79.0	82.4
29-33	11.6	13.1	16.9	9.9	12.1	11.1
34 and over	4.0	2.4	3.1	3.1	2.7	2.0
						16.9
						75.6
						5.7
						1.8

Table 3. Total medical college graduates and graduates in private practice, by geographic division and state of practice; population and per capita income, 1945 class

Division and state of practice	Number of 1945 graduates		Percentage distribution			Per capita income 1953 $\frac{2}{1}$
			1945 graduates		Population 1953	
	Total $\frac{1}{2}$	In private practice	Total	In private practice		
United States	3,935	3,158	100.0	100.0	100.0	\$1,709
Middle Atlantic	797	610	20.3	19.3	19.6	2,032
New York	428	309	10.9	9.8	9.6	2,158
New Jersey	101	92	2.6	2.9	3.3	2,095
Pennsylvania	268	209	6.8	6.6	6.7	1,822
Pacific	553	461	14.1	14.6	10.3	1,984
Washington	97	84	2.5	2.7	1.6	1,882
Oregon	52	39	1.3	1.2	1.0	1,724
California	404	338	10.3	10.7	7.7	2,039
East North Central	702	572	17.8	18.1	20.1	1,975
Ohio	196	166	5.0	5.3	5.3	2,012
Indiana	94	85	2.4	2.7	2.6	1,834
Illinois	182	147	4.6	4.6	5.7	2,088
Michigan	140	104	3.5	3.3	4.3	2,003
Wisconsin	90	70	2.3	2.2	2.2	1,712

(Cont'd)

Table 3 (Cont'd)

New England	276	196	7.0	6.2	6.1	1,824
Maine	12	9	0.3	0.3	0.6	1,369
New Hampshire	12	11	0.3	0.3	0.3	1,620
Vermont	6	5	0.2	0.2	0.2	1,401
Massachusetts	151	97	3.8	3.1	3.1	1,812
Rhode Island	19	13	0.5	0.4	0.5	1,749
Connecticut	76	61	1.9	1.9	1.4	2,194
Mountain	178	152	4.5	4.8	3.5	1,565
Montana	17	17	0.4	0.5	0.4	1,689
Idaho	15	13	0.4	0.4	0.4	1,411
Wyoming	9	7	0.2	0.2	0.2	1,650
Colorado	58	47	1.5	1.5	0.9	1,675
New Mexico	14	12	0.3	0.4	0.5	1,347
Arizona	19	19	0.5	0.6	0.6	1,473
Utah	43	34	1.1	1.1	0.4	1,510
Nevada	3	3	0.1	0.1	0.1	2,175
West North Central	330	248	8.4	7.8	9.1	1,552
Minnesota	83	51	2.1	1.6	1.9	1,547
Iowa	51	43	1.3	1.4	1.6	1,518
Missouri	92	74	2.4	2.3	2.6	1,652
North Dakota	9	9	0.2	0.3	0.4	1,295
South Dakota	17	13	0.4	0.4	0.4	1,362
Nebraska	31	24	0.8	0.7	0.9	1,533
Kansas	47	34	1.2	1.1	1.3	1,550

(Cont'd)

Table 3 (Cont'd)

South Atlantic	494	419	12.6	13.3	14.2	1,349
Delaware	10	8	0.3	0.3	0.2	2,304
Maryland	66	48	1.7	1.5	1.6	1,857
District of Columbia	34	22	0.9	0.7	0.5	2,109
Virginia	75	62	1.9	2.0	2.2	1,361
West Virginia	33	30	0.8	0.9	1.2	1,257
North Carolina	94	79	2.4	2.5	2.7	1,097
South Carolina	40	35	1.0	1.1	1.4	1,095
Georgia	69	63	1.8	2.0	2.3	1,184
Florida	73	72	1.8	2.3	2.1	1,368
West South Central	387	315	9.8	10.0	9.7	1,347
Arkansas	44	37	1.1	1.2	1.2	939
Louisiana	77	55	2.0	1.7	1.8	1,249
Oklahoma	49	46	1.2	1.5	1.4	1,327
Texas	217	177	5.5	5.6	5.3	1,480
East South Central	218	185	5.5	5.9	7.4	1,076
Kentucky	48	39	1.2	1.2	1.9	1,167
Tennessee	89	76	2.3	2.4	2.1	1,186
Alabama	57	49	1.4	1.6	2.0	1,043
Mississippi	24	21	0.6	0.7	1.4	834

1/ Excludes graduates in the Armed Forces, those not practicing and those outside the United States or whose place of practice was not reported.

2/ From the 1953 study of the Department of Commerce, published in Survey of Current Business.

Table 4. Medical college graduates in private practice by size of community of practice, 1930, 1935, 1940, and 1945 classes

Size of community of practice ^{1/}	Year of graduation			
	1930	1935	1940	1945
Number of graduates				
Total	2,666	2,640	2,742	3,178
500,000 and over	768	675	663	626
100,000-499,999	429	549	589	738
50,000-99,999	181	255	299	340
25,000-49,999	151	246	328	356
5,000-24,999	445	483	480	675
2,500-4,999	682	133	125	144
Under 2,500	10	268	236	294
Unknown	10	31	22	5
Percentage distribution				
Total known size	100.0	100.0	100.0	100.0
500,000 and over	28.9	25.9	24.4	19.7
100,000-499,999	16.1	21.0	21.6	23.3
50,000-99,999	6.8	9.8	11.0	10.7
25,000-49,999	5.7	9.4	12.1	11.2
5,000-24,999	16.8	18.5	17.6	21.3
2,500-4,999	25.7	5.1	4.6	4.5
Under 2,500		10.3	8.7	9.3

^{1/} Communities are classified by 1930 population for 1930 graduates and by 1950 population for 1935, 1940, and 1945 graduates.

Table 5. Percentage distribution of graduates of each medical college in private practice, by size of community practice, 1945 class

Medical college	Total	Size of community of practice					
		500,000 and over	100,000-499,999	50,000-99,999	25,000-49,999	5,000-24,999	2,500-4,999
Total	100.0 $\frac{1}{2}$	19.7	23.2	10.7	11.2	21.2	4.5
Arkansas	100.0	5.6	38.9	-	19.4	25.0	-
Medical Evangelists	100.0	2.4	9.5	9.5	7.1	28.6	7.1
Southern California	100.0	14.3	17.1	17.1	14.3	17.1	2.9
Stanford	100.0	22.2	22.2	11.1	7.4	33.3	3.7
California	100.0	10.8	27.0	10.8	16.2	29.7	-
Colorado	100.0	-	57.1	7.1	10.7	25.0	-
Yale	100.0	22.2	30.6	5.6	19.4	11.1	5.6
Georgetown	100.0	22.0	22.0	14.0	20.0	10.0	-
George Washington	100.0	20.0	14.3	5.7	8.6	22.9	5.7
Howard	100.0	71.4	4.8	-	19.0	4.8	-
Emory	100.0	5.1	48.7	7.7	10.3	23.1	5.1
Georgia	100.0	-	24.3	13.5	5.4	27.0	24.3
Chicago Medical School	100.0	73.9	-	-	4.3	8.7	4.3
Northwestern	100.0	22.2	15.3	11.1	18.1	22.2	1.4
Loyola	100.0	30.6	10.2	10.2	10.2	22.4	8.2
							6.1

(Cont'd)

Table 5 (Cont'd)

Chicago University	100.0	35.5	22.6	6.5	6.5	16.1	3.2	9.7
Illinois	100.0	24.4	17.8	16.7	8.9	18.9	5.6	7.8
Indiana	100.0	9.0	32.8	11.9	9.0	16.4	3.0	17.9
Iowa	100.0	21.7	17.4	6.5	10.9	19.6	6.5	17.4
Kansas	100.0	6.2	37.5	8.3	6.2	12.5	4.2	25.0
Louisville	100.0	4.8	33.3	2.4	11.9	23.8	7.1	16.7
Louisiana	100.0	19.5	19.5	7.3	12.2	22.0	7.3	12.2
Tulane	100.0	30.0	22.2	13.3	12.2	17.8	-	3.3
Johns Hopkins	100.0	15.6	15.6	12.5	18.8	15.6	9.4	12.5
Maryland	100.0	27.7	21.3	10.6	8.5	19.1	2.1	10.6
Boston	100.0	14.3	17.8	14.3	14.3	21.4	3.6	14.3
Harvard	100.0	25.0	26.5	10.3	17.6	14.7	1.5	4.4
Tufts	100.0	6.9	27.6	24.1	10.3	25.9	1.7	3.4
Michigan	100.0	15.5	16.9	21.1	14.1	25.4	1.4	5.6
Wayne	100.0	33.3	9.1	12.1	12.1	18.2	3.0	12.1
Minnesota	100.0	19.4	14.5	8.1	14.5	19.4	4.8	19.4
St. Louis	100.0	32.0	29.3	6.7	6.7	20.0	1.3	4.0
Washington	100.0	22.2	17.5	9.5	11.1	28.6	4.8	6.3
Creighton	100.0	26.5	32.4	5.9	5.9	5.9	14.7	8.8
Nebraska	100.0	11.1	28.9	6.7	6.7	22.2	6.7	17.8
Albany	100.0	11.1	38.9	11.1	11.1	27.8	-	-
Buffalo	100.0	45.6	6.5	6.5	6.5	23.9	4.3	6.5
Columbia	100.0	22.8	15.8	12.3	8.8	29.8	3.5	7.0
Cornell	100.0	13.3	28.9	4.4	17.8	33.3	-	2.2
New York Medical College	100.0	50.0	10.0	10.0	7.5	10.0	2.5	10.0

(Cont'd)

Table 5 (Cont'd)

New York University	100.0	39.1	10.9	3.1	9.4	28.1	4.7	4.7
Long Island	100.0	35.3	15.7	5.9	13.7	15.7	3.9	9.8
Syracuse	100.0	2.9	44.1	5.9	14.7	17.6	2.9	11.8
Rochester	100.0	17.5	37.5	25.0	4.2	12.5	-	8.3
Duke	100.0	10.5	36.8	23.7	18.4	10.5	-	-
Bowman Gray	100.0	-	12.5	33.3	4.2	33.3	-	16.7
Cincinnati	100.0	35.3	19.6	11.8	13.7	13.7	-	5.9
Western Reserve	100.0	32.7	21.2	7.7	21.2	17.3	-	-
Ohio	100.0	9.1	43.2	18.2	4.5	13.6	6.8	4.5
Oklahoma	100.0	5.0	37.5	7.5	5.0	17.5	10.0	17.5
Oregon	100.0	2.2	37.8	4.4	17.8	26.7	2.2	8.9
Hahnemann	100.0	29.7	16.2	9.5	5.4	28.4	4.0	6.8
Jefferson	100.0	12.2	22.2	16.7	12.2	20.0	5.6	11.1
Temple	100.0	23.6	15.3	9.7	8.3	23.6	11.1	8.3
Pennsylvania	100.0	21.6	14.9	16.2	14.9	23.0	1.4	8.1
Woman's	100.0	44.4	22.2	11.1	-	22.2	-	-
Pittsburgh	100.0	37.8	8.9	11.1	11.1	24.4	4.4	2.2
South Carolina	100.0	4.0	4.0	28.0	8.0	36.0	12.0	8.0
Tennessee	100.0	2.4	43.4	2.4	8.4	19.3	8.4	14.5
Meharry	100.0	33.3	38.1	9.5	4.8	4.8	4.8	4.8
Vanderbilt	100.0	7.7	33.3	17.9	10.3	17.9	7.7	5.1
Southwestern	100.0	8.0	24.0	4.0	12.0	44.0	4.0	4.0
Texas	100.0	11.9	34.3	11.9	6.0	26.9	7.5	1.5
Baylor	100.0	25.0	12.5	4.2	4.2	20.8	20.8	12.5
Utah	100.0	4.3	34.8	8.7	-	17.4	17.4	13.0

(Cont'd)

Table 5 (Cont'd)

Vermont	100.0	-	45.4	-	27.3	9.1	18.2	-
University of Virginia	100.0	10.5	15.8	5.3	23.7	36.8	2.6	5.3
Medical College of Virginia	100.0	1.7	25.9	8.6	8.6	31.0	1.7	22.4
Wisconsin	100.0	16.2	5.4	18.9	13.5	21.6	8.1	16.2
Marquette	100.0	30.8	23.1	9.6	9.6	15.4	5.8	5.8

1/ Includes 5 graduates for whom size of community of practice was unknown.

Table 6. Percent of graduates of each medical college in private practice who are practicing in the same city 1/ as the medical college attended, 1930, 1935, 1940, and 1945 classes

Medical college	Year of graduation			
	1930	1935	1940	1945
Total	20.9	19.5	18.1	16.7
Arkansas	-	11.1 <u>2</u> /	11.8	27.8
Medical Evangelists	-	16.7	6.7	7.1
Southern California	<u>3</u> /	33.3 <u>2</u> /	33.3	20.0
Stanford	-	13.3	30.3	22.2
California	35.5	21.4	33.3	2.7
Colorado	-	32.0	25.0	42.9
Yale	3.8	5.0 <u>2</u> /	4.5 <u>2</u> /	5.6
Georgetown	10.3	9.8	19.6	16.0
George Washington	12.0	29.7	31.8 <u>2</u> /	22.8
Howard	-	5.3 <u>2</u> /	23.5 <u>2</u> /	4.8
Emory	3.8	18.8	23.3	25.6
Georgia	6.2 <u>2</u> /	5.3 <u>2</u> /	7.7 <u>2</u> /	8.1
Chicago Medical School	<u>3</u> /	29.6	29.6	43.5
Northwestern	18.8	9.1	9.8	12.5
Loyola	45.3	39.0	29.3	20.4

(Cont'd)

Table 6 (Cont'd)

Chicago University	3/	9.1 2/	21.4 2/	6.5
Rush	25.4	9.5	9.5	3/
Illinois	-	11.5	14.5	15.6
Indiana	-	22.6	21.1	10.4
Iowa	1.7	-	4.3	-
Kansas	-	11.1	5.1	6.2
Louisville	7.4	14.6	15.4	19.0
Louisiana	3/	4.3 2/	16.2	12.2
Tulane	9.3	10.2	15.9	13.3
Johns Hopkins	12.1	15.4	13.5	3.1
Maryland	18.9	31.6	29.4	23.4
Boston	14.7	11.5	16.7 2/	3.6
Harvard	22.2	9.3	12.8	11.8
Tufts	14.9	17.3	9.6	5.2
Michigan	3.0	-	1.6	8.5
Wayne	42.9	42.9	46.4	27.3
Minnesota	31.9	20.8	15.6	22.6
St. Louis	56.5	12.0	14.3	18.7
Washington	14.3	29.4	19.2	15.9
Creighton	7.2	13.9	8.3	11.8
Nebraska	7.3	6.8	10.3	8.9
Albany	-	10.0 2/	21.1 2/	11.1
Buffalo	45.7	30.6	46.4	43.5
Columbia	46.0	34.5	30.2	17.5
Cornell	53.1	30.8	24.3	8.9

(Cont'd)

Table 6 (Cont'd)

New York Medical College	76.6	51.5	25.0	47.5
New York University	76.5	59.2	48.6	39.1
Long Island	82.6	49.0	23.7	33.3
Syracuse	16.7	17.6	14.3	35.3
Rochester	16.7 2/	18.5	14.3	16.7
Duke	3/	-	-	-
Bowman Gray	3/	3/	3/	8.3
Cincinnati	34.4	28.6	24.3	25.5
Western Reserve	21.6	21.6	32.4	25.0
Ohio	18.9	20.5	27.0	27.3
Oklahoma	-	12.5	28.6	17.5
Oregon	-	37.5 2/	7.1	17.8
Hahnemann	16.7	12.2	14.1	20.3
Jefferson	10.6	20.0	15.3	8.9
Temple	25.8	20.5	22.2	20.8
Pennsylvania	22.1	24.1	18.5	13.5
Woman's	42.9 2/	7.7 2/	-	11.1
Pittsburgh	29.2	36.1	28.0	37.8
South Carolina	9.5 2/	9.5 2/	3.6	20.0
Tennessee	4.5	20.0	14.9	14.5
Meharry	4.3 2/	-	-	-
Vanderbilt	5.6 2/	4.5 2/	20.6	7.7
Southwestern	3/	3/	3/	16.0
Texas	3.8	2.3	5.4	1.5
Baylor	-	12.2	8.1	25.0

(Cont'd)

Table 6 (Cont'd)

Utah	$\frac{3}{5.3}$	$\frac{2}{2}$	$\frac{3}{11.8}$	$\frac{2}{2}$	$\frac{3}{4.8}$	$\frac{2}{2}$	30.4
Vermont							27.3
University of Virginia	3.4		7.1		3.6		-
Medical College of Virginia	7.7		15.4		17.2		10.3
Wisconsin	25.0	$\frac{2}{2}$	9.1		9.7		2.7
Marquette	47.6		25.0		16.1		23.1

1/ Medical colleges located in suburbs of large cities have been considered part of the larger city. Both St. Paul and Minneapolis have been considered the same city for graduates of the University of Minnesota.

2/ Percent based on less than 25.

3/ Not included in study for this year.

Table 7. Percent of graduates of each medical college in private practice who are practicing in the same state as the medical college attended, 1930, 1935, 1940, and 1945 classes

Form of medical college control and medical college	Year of graduation			
	1930	1935	1940	1945
Total	55.7	50.9	46.0	45.9
Public	56.3	55.0	53.4	52.2
Arkansas	50.0 $\frac{1}{2}$	33.3 $\frac{1}{2}$	47.1	66.7
California	93.5	85.7	96.7	86.5
Colorado	50.0 $\frac{1}{2}$	44.0	50.0	60.7
Georgia	56.2 $\frac{1}{2}$	63.2 $\frac{1}{2}$	69.2 $\frac{1}{2}$	59.5
Illinois	70.6	45.9	50.7	42.2
Indiana	80.0	83.0	68.4	56.7
Iowa	56.7	52.8	63.0	52.2
Kansas	28.6	52.8	43.6	43.8
Louisville	40.7	43.9	30.8	38.1
Louisiana	$\frac{2}{2}$	34.8	45.9	48.8
Maryland	26.4	36.8	37.3	31.9
Michigan	53.5	43.4	50.0	53.5
Wayne	94.3	77.1	78.6	60.6
Minnesota	65.3	54.7	45.3	43.5
Nebraska	51.2	18.2	41.0	33.3

(Cont'd)

Table 7 (Cont'd)

Cincinnati	66.7	54.3	51.4	45.1
Ohio	91.9	84.1	73.0	68.2
Oklahoma	55.2	53.1	67.9	55.0
Oregon	45.8 1/	79.2 1/	39.3	44.4
South Carolina	81.0 1/	66.7 1/	60.7	72.0
Tennessee	43.2	53.3	42.6	45.8
Texas	84.6	95.3	91.1	88.1
Utah	2/	2/	2/	69.6
Vermont	36.8 1/	29.4 1/	33.3 1/	36.4
University of Virginia	17.2	50.0	46.4	31.6
Medical College of Virginia ...	11.5	38.5	31.0	39.7
Wisconsin	80.0 1/	51.5	41.9	56.8
Private	55.4	48.6	41.6	41.8
Medical Evangelists	50.0	64.3	51.1	61.9
Southern California	2/	94.4 1/	100.0	91.4
Stanford	91.4	96.7	97.0	88.9
Yale	34.6	25.0 1/	31.8 1/	16.7
Georgetown	10.3	9.8	19.6	16.0
George Washington	12.0	29.7	31.8 1/	22.9
Howard	-	5.3 1/	23.5 1/	4.8
Emory	38.5	46.9	46.7	43.6
Chicago Medical School	2/	85.2	77.8	65.2
Northwestern	30.4	28.6	25.6	20.8

(Cont'd)

Table 7 (Cont'd)

Loyola	58.5	61.0	36.6	46.9
Chicago University	2/	9.1 1/	28.6 1/	12.9
Rush	35.8	20.2	15.9	2/
Tulane	33.3	22.4	24.6	20.0
Johns Hopkins	12.1	15.4	13.5	6.2
Boston	47.1	46.2	37.5 1/	35.7
Harvard	50.0	27.9	26.9	25.0
Tufts	58.2	57.7	50.0	58.6
St. Louis	33.3	28.0	14.3	25.3
Washington	38.1	43.1	32.7	38.1
Creighton	17.9	25.0	8.3	11.8
Albany	78.6 1/	90.0 1/	63.2 1/	72.2
Buffalo	94.3	86.1	78.6	73.9
Columbia	73.0	49.1	43.4	33.3
Cornell	66.7	46.2	48.6	24.4
New York Medical College	93.6	69.7	39.3	62.5
New York University	80.0	71.1	51.4	68.8
Long Island	89.9	67.3	44.7	51.0
Syracuse	80.6	76.5	68.6	64.7
Rochester	50.0 1/	55.6	42.9	45.8
Duke	2/	20.0	32.3	15.8
Bowman Gray	2/	2/	2/	75.0
Western Reserve	73.0	64.9	67.6	59.6
Hahnemann	54.8	55.1	43.8	44.6
Jefferson	56.5	54.1	42.4	33.3

(Cont'd)

Table 7 (Cont'd)

Temple	74.2	63.6	46.0	50.0
Pennsylvania	44.2	57.0	45.7	45.9
Woman's	57.1 1/	30.8 1/	44.4 1/	22.2
Pittsburgh	93.8	83.3	84.0	77.8
Meharry	8.7 1/	-	-	-
Vanderbilt	22.2 1/	27.3 1/	32.4	20.5
Southwestern	2/	2/	2/	68.0
Baylor	84.2	80.5	78.4	79.2
Marquette	88.1	46.9	35.5	46.2

1/ Percent based on less than 25.

2/ Not included in study for this year.

Table 8. Percent of graduates of each medical college in private practice in the same city, same state, and same geographic division as their prior residence, 1945 class

Medical college	Percentage of graduates practicing in:		
	Same city as prior residence 1/	Same state as prior residence 1/	Same division as prior residence 1/
Total	30.3	60.5	71.1
Arkansas	25.0	66.7	77.8
Medical Evangelists	4.8	50.0	54.8
Southern California	31.4	91.4	91.4
Stanford	22.2	85.2	92.6
California	24.3	89.2	94.6
Colorado	42.8	57.1	71.4
Yale	16.7	44.4	58.3
Georgetown	56.0	66.0	74.0
George Washington	31.4	48.6	65.7
Howard	42.9	47.6	52.4
Emory	41.0	69.2	87.2
Georgia	24.3	59.5	86.5
Chicago Medical School	56.5	69.6	73.9
Northwestern	26.4	51.4	59.7
Loyola	36.7	69.4	80.0

(Cont'd)

Table 8 (Cont'd)

Chicago University	12.9	25.8	32.3
Illinois	17.8	44.4	54.4
Indiana	23.9	61.2	73.1
Iowa	10.9	52.2	58.7
Kansas	14.6	43.8	62.5
Louisville	14.3	52.4	54.8
Louisiana	24.4	61.0	73.2
Tulane	45.6	62.2	74.4
Johns Hopkins	25.0	43.8	62.5
Maryland	40.4	53.2	74.5
Boston	10.7	60.7	75.0
Harvard	20.6	45.6	55.9
Tufts	34.5	74.1	81.0
Michigan	22.5	53.5	66.2
Wayne	27.3	60.6	69.7
Minnesota	22.6	48.4	54.8
St. Louis	37.3	64.0	72.0
Washington	39.7	61.9	71.4
Creighton	32.4	52.9	70.6
Nebraska	11.1	33.3	44.4
Albany	27.8	72.2	72.2
Buffalo	47.8	78.3	82.6
Columbia	33.3	57.9	64.9
Cornell	26.7	42.2	48.9
New York Medical College	42.5	60.0	80.0

(Cont'd)

Table 8 (Cont'd)

New York University	42.2	68.8	76.6
Long Island	39.2	64.7	80.4
Syracuse	29.4	67.6	70.6
Rochester	29.2	54.2	70.8
Duke	26.3	39.5	57.9
Bowman Gray	29.2	79.2	79.2
Cincinnati	33.3	56.9	70.6
Western Reserve	26.9	65.4	71.2
Ohio	38.6	68.2	77.3
Oklahoma	22.5	52.5	67.5
Oregon	26.7	64.4	91.1
Hahnemann	36.5	64.9	71.6
Jefferson	35.6	65.6	74.4
Temple	25.0	65.3	76.4
Pennsylvania	27.0	63.5	70.3
Woman's	44.4	77.8	77.8
Pittsburgh	40.0	80.0	82.2
South Carolina	40.0	72.0	90.0
Tennessee	36.1	57.8	69.9
Meharry	33.3	42.9	57.1
Vanderbilt	41.0	59.0	66.7
Southwestern	12.0	64.0	72.0
Texas	34.3	88.1	94.0
Baylor	29.2	87.5	87.5
Utah	34.8	69.6	82.6

(Cont'd)

Table 8 (Cont'd)

Vermont	36.4	63.6	72.7
University of Virginia	34.2	50.0	78.9
Medical College of Virginia	29.3	58.6	84.5
Wisconsin	8.1	59.5	67.6
Marquette	44.2	69.2	73.1

1/ Place of residence at time of entering medical college.

Table 9. Percent of graduates of public and private medical colleges whose prior residence was in the same city, same state, and same division as the medical college, 1935, 1940, and 1945 classes

Relationship and year		Total	Public	Private
Prior residence in same city as medical college:				
1935	.....	26.6	24.9	27.5
1940	.....	25.0	26.3	24.1
1945	.....	26.4	26.5	26.4
Prior residence in same state as medical college:				
1935	.....	60.4	75.6	51.8
1940	.....	60.7	80.4	48.9
1945	.....	63.0	81.4	51.4
Prior residence in same division as medical college:				
1935	.....	71.2	82.9	64.7
1940	.....	71.7	87.6	62.2
1945	.....	74.1	89.5	64.3

Table 10. Percent of graduates of each public and private medical college whose prior residence was in the same city, same state, and same division as the medical college, 1945 class

Form of medical college control and medical college	Percentage of graduates whose prior residence was:		
	Same city as medical college	Same state as medical college	Same division as medical college
Total	26.4	63.0	74.1
Public	26.5	81.4	89.5
Arkansas	17.5	97.5	97.5
California	10.5	98.2	98.2
Colorado	58.5	82.9	85.4
Georgia	11.6	100.0	100.0
Illinois	43.6	88.9	89.7
Indiana	16.7	96.2	97.4
Iowa	14.1	100.0	100.0
Kansas	11.5	90.2	100.0
Louisville	22.8	54.4	56.1
Louisiana	22.2	70.4	79.6
Maryland	36.7	56.7	75.0
Michigan	11.3	72.6	84.0
Wayne	60.4	91.7	93.8
Minnesota	49.4	92.1	93.3
Nebraska	31.7	96.7	98.3

(Cont'd)

Table 10 (Cont'd)

Cincinnati	43.3	75.0	78.3
Ohio	34.0	100.0	100.0
Oklahoma	20.4	95.9	100.0
Oregon	45.6	70.2	94.7
South Carolina	22.2	91.7	94.4
Tennessee	15.6	47.9	68.8
Texas	7.0	100.0	100.0
Utah	48.4	90.3	93.5
Vermont	31.8	59.1	86.4
University of Virginia	8.7	56.5	69.6
Medical College of Virginia	13.9	43.1	94.4
Wisconsin	28.3	94.3	98.1
Private	26.4	51.4	64.3
Medical Evangelists	13.1	52.5	60.7
Southern California	55.0	100.0	100.0
Stanford	22.2	86.1	91.7
Yale	12.2	24.5	49.0
Georgetown	16.7	16.7	21.7
George Washington	47.1	47.1	47.1
Howard	31.4	31.4	45.7
Emory	22.2	60.0	82.2
Chicago Medical School	36.7	46.7	53.3
Northwestern	19.1	29.2	46.1

(Cont'd)

Table 10 (Cont'd)

Loyola	42.9	67.9	80.4
Chicago University	34.0	38.3	51.1
Tulane	14.5	23.6	40.0
Johns Hopkins	13.3	15.0	50.0
Boston	26.7	57.8	75.6
Harvard	8.8	23.7	31.6
Tufts	21.9	75.0	95.3
St. Louis	18.4	18.4	24.3
Washington	21.0	46.9	51.9
Creighton	19.5	19.5	53.7
Albany	22.2	85.2	85.2
Buffalo	44.3	90.2	91.8
Columbia	27.3	37.5	60.2
Cornell	27.3	51.5	72.7
New York Medical College	64.2	79.2	94.3
New York University	73.2	82.6	93.0
Long Island	58.2	68.7	76.1
Syracuse	39.0	92.7	95.1
Rochester	14.9	61.7	74.5
Duke	3.8	32.1	64.2
Bowman Gray	10.3	72.4	79.3
Western Reserve	29.2	80.6	81.9
Hahnemann	28.4	48.9	70.5
Jefferson	13.4	46.4	61.6
Temple	18.1	58.5	71.3

(Cont'd)

Table 10 (Cont'd)

Pennsylvania	20.2	65.4	76.0
Woman's	13.3	20.0	73.3
Pittsburgh	52.4	98.4	98.4
Meharry	5.4	5.4	8.1
Vanderbilt	15.9	34.1	75.0
Southwestern	33.3	97.0	97.0
Baylor	6.9	75.9	79.3
Marquette	27.0	41.3	47.6

Table 11. Percentage distribution of medical college graduates by relationship between place of practice and places of internship, medical college, and prior residence, 1935, 1940, and 1945 classes

Relationship	Same city			Same state		
	1935	1940	1945	1935	1940	1945
Number of graduates <u>1/</u>	518	483	3,657	518	483	3,657
Total	100.0	100.0	100.0	100.0	100.0	100.0
Practicing in same place as internship	22.2	22.2	20.3	49.6	43.7	43.6
Medical college and prior residence also in same place <u>2/</u>	8.7	9.7	7.6	33.4	25.9	27.0
Medical college also in same place <u>2/</u>	4.4	4.1	3.6	5.0	3.9	2.6
Prior residence also in same place <u>2/</u>	4.4	3.3	3.9	6.8	6.6	7.9
Internship alone in same place <u>2/</u>	4.6	5.0	5.2	4.4	7.2	6.2
Practicing in same place as medical college	18.5	18.6	17.7	49.8	41.8	44.0
Internship and prior residence also in same place	8.7	9.7	7.6	33.4	25.9	27.0
Internship also in same place	4.4	4.1	3.6	5.0	3.9	2.6
Prior residence also in same place <u>2/</u>	3.1	3.1	3.3	9.7	10.8	12.3
Medical college alone in same place <u>2/</u>	2.3	1.7	3.3	1.7	1.2	2.2
Practicing in same place as prior residence	29.5	31.9	27.7	61.4	54.7	57.4
Internship and medical college also in same place	8.7	9.7	7.6	33.4	25.9	27.0
Internship also in same place	4.4	3.3	3.9	6.8	6.6	7.9
Medical college also in same place	3.1	3.1	3.3	9.7	10.8	12.3
Prior residence alone in same place <u>2/</u>	13.3	15.7	12.9	11.6	11.4	10.3
Practicing in a different place <u>2/</u>	59.1	57.3	60.2	27.4	32.9	31.6

1/ Excludes those not in practice, those in the Armed Forces, medical missionaries, residents, and fellows.

2/ These 8 items add to 100 percent.

Table 12. Distribution of medical college graduates with residency training by relationship between place of practice and places of prior residence, medical college, internship, and residency, 1945 class

Relationship	Same city		Same state	
	Number	Percent	Number	Percent
Number of graduates 1/	2,986	100.0	2,986	100.0
Practicing in the same place as -				
All four other places:				
Prior residence, medical college, internship, and residency	205	6.9	670	22.5
Three other places:				
Prior residence, medical college, and internship	40	1.3	102	3.4
Prior residence, medical college, and residency	72	2.4	240	8.0
Prior residency, internship, and residency	65	2.2	155	5.2
Medical college, internship, and residency	114	3.8	75	2.5

(Cont'd)

Table 12 (Cont'd)

Two other places:					
Prior residence and medical college	34	1.1	110	3.7	
Prior residence and internship	42	1.4	62	2.1	
Prior residence and residency	60	2.0	102	3.4	
Medical college and internship	10	.3	6	.2	
Medical college and residency	82	2.8	45	1.5	
Internship and residency	115	3.9	146	4.9	
One other place:					
Prior residence	279	9.3	189	6.3	
Medical college	23	.8	19	.6	
Internship	50	1.7	45	1.5	
Residency	277	9.3	323	10.8	
Practicing in a different place	1,518	50.8	697	23.4	

1/ Excludes those not in practice, those in the Armed Forces, medical missionaries, resident, and fellows.

Table 13. Percentage distribution of graduates of each medical college by size of community of prior residence, 1945 class

Medical college	Total	Size of community of prior residence						
		500,000 and over	100,000- 499,999	50,000- 99,999	25,000- 49,999	5,000- 24,999	2,500- 4,999	Under 2,500
Total	100.0	25.4	19.1	9.7	9.6	18.3	5.3	12.2
Arkansas	100.0	-	20.0	-	12.5	30.0	15.0	22.5
Medical Evangelists	100.0	23.0	9.8	3.3	4.9	23.0	4.9	26.2
Southern California	100.0	57.5	10.0	12.5	7.5	10.0	-	2.5
Stanford	100.0	25.0	22.2	2.8	22.2	16.7	5.6	2.8
California	100.0	38.6	42.1	5.3	1.8	8.8	-	3.5
Colorado	100.0	-	61.0	-	12.2	17.1	4.9	4.9
Yale	100.0	16.3	34.7	8.2	12.2	12.2	4.1	12.2
Georgetown	100.0	25.0	28.3	10.0	8.3	20.0	1.7	6.7
George Washington	100.0	43.1	13.7	9.8	7.8	7.8	7.8	9.8
Howard	100.0	68.6	5.7	5.7	14.3	2.8	-	2.8
Emory	100.0	-	31.1	8.9	11.1	20.0	13.3	15.6
Georgia	100.0	-	16.3	18.6	2.3	14.0	14.0	34.9
Chicago Medical School	100.0	80.0	3.3	3.3	-	6.7	3.3	3.3
Northwestern	100.0	20.2	24.7	5.6	5.6	28.1	5.6	10.1
Loyola	100.0	51.8	12.5	12.5	7.1	12.5	1.8	1.8
Chicago University	100.0	40.4	14.9	6.4	6.4	17.0	4.2	10.6
Illinois	100.0	46.2	0.8	11.1	9.4	17.9	4.3	10.3
Indiana	100.0	2.6	26.9	10.3	17.9	17.9	9.0	15.4
Iowa	100.0	-	7.8	1.6	20.3	17.2	14.1	37.5
Kansas	100.0	-	26.2	9.8	3.3	34.4	9.8	16.4

(Cont'd)

Table 13 (Cont'd)

Louisville	100.0	7.0	29.8	5.3	8.8	15.8	10.5	22.8
Louisiana	100.0	24.1	16.7	5.6	14.8	11.1	11.1	14.8
Tulane	100.0	26.4	18.2	12.7	11.8	19.1	3.6	7.3
Johns Hopkins	100.0	31.7	11.7	8.3	13.3	16.7	5.0	13.3
Maryland	100.0	38.3	5.0	11.7	8.3	13.3	1.7	21.7
Boston	100.0	40.0	11.1	17.8	8.9	13.3	4.4	4.4
Harvard	100.0	20.2	17.5	14.0	10.5	26.3	2.6	7.9
Tufts	100.0	21.9	18.8	18.8	17.2	15.6	-	6.2
Michigan	100.0	18.9	9.4	15.1	27.4	18.9	3.8	5.7
Wayne	100.0	62.5	6.2	8.3	8.3	10.4	-	4.2
Minnesota	100.0	36.0	13.5	1.1	3.4	16.8	6.7	22.5
St. Louis	100.0	34.0	22.3	7.8	8.7	14.6	4.8	7.8
Washington	100.0	24.7	8.6	8.6	14.8	24.7	2.5	16.0
Creighton	100.0	24.4	34.1	9.8	4.9	9.8	2.4	14.6
Nebraska	100.0	-	31.7	21.7	-	10.0	8.3	26.7
Albany	100.0	11.1	33.3	14.8	14.8	14.8	-	7.4
Buffalo	100.0	47.5	6.6	8.2	3.3	21.3	4.9	8.2
Columbia	100.0	35.2	15.9	12.5	6.8	15.9	3.4	10.2
Cornell	100.0	28.8	12.1	6.1	16.7	25.8	4.5	4.5
New York Medical College	100.0	64.2	9.4	1.9	3.8	11.3	3.8	5.7
New York University	100.0	73.3	7.0	4.6	3.5	8.1	1.2	2.3
Long Island	100.0	58.2	7.5	6.0	7.5	14.9	1.5	4.5
Syracuse	100.0	-	48.8	4.9	2.4	12.2	7.3	24.4
Rochester	100.0	17.0	27.7	8.5	14.9	17.0	4.2	10.6
Duke	100.0	13.2	17.0	20.8	17.0	24.5	3.8	9.4
Bowman Gray	100.0	-	10.3	41.4	6.9	10.3	10.3	20.7
Cincinnati	100.0	48.3	13.3	8.3	3.3	8.3	1.7	15.0
Western Reserve	100.0	34.7	22.2	9.7	8.3	12.5	1.4	11.1
Ohio	100.0	7.5	45.3	3.8	5.7	22.6	5.7	9.4
Oklahoma	100.0	-	28.6	-	18.4	30.6	10.2	12.2

(Cont'd)

Table 13 (Cont'd)

Oregon	100.0	1.8	54.4	-	7.0	22.8	7.0	7.0
Hahnemann	100.0	38.6	9.1	13.6	4.5	22.7	3.4	5.7
Jefferson	100.0	12.5	17.9	10.7	8.0	31.2	8.9	10.7
Temple	100.0	21.3	14.9	9.6	5.3	27.7	4.3	17.0
Pennsylvania	100.0	25.0	14.4	7.7	7.7	14.4	7.7	23.1
Woman's	100.0	53.3	6.7	6.7	6.7	13.3	-	13.3
Pittsburgh	100.0	52.4	1.6	7.9	3.2	23.8	3.2	7.9
South Carolina	100.0	-	-	36.1	-	22.2	25.0	16.7
Tennessee	100.0	2.1	38.5	7.3	6.2	15.6	7.3	21.9
Meharry	100.0	35.1	21.6	18.9	16.2	8.1	-	-
Vanderbilt	100.0	4.5	38.6	6.8	4.5	20.5	9.1	15.9
Southwestern	100.0	-	45.4	3.0	6.1	27.3	3.0	12.1
Texas	100.0	18.6	30.2	10.5	1.2	23.3	7.0	9.3
Baylor	100.0	6.9	24.1	6.9	13.8	27.6	3.4	17.2
Utah	100.0	3.2	48.4	9.7	6.4	16.1	9.7	6.5
Vermont	100.0	-	13.6	-	45.5	13.6	4.5	22.7
University of Virginia	100.0	8.7	10.9	10.9	28.3	23.9	2.2	15.2
Medical College of Virginia	100.0	2.8	16.7	13.9	13.9	23.6	5.6	23.6
Wisconsin	100.0	17.0	-	35.8	17.0	18.9	7.5	3.8
Marquette	100.0	34.9	23.8	4.8	14.3	15.9	3.2	3.2

Table 14. Graduates of each public and private medical college in private practice in the United States who are practicing in communities of less than 25,000 and those whose prior residence was in communities of less than 25,000, 1945 class

Form of medical college control and medical college	Number of graduates			Percent practicing in communities under 25,000	Percent with prior residence in com- munities under 25,000
	Total	Practicing in communities under 25,000	Prior residence in communities under 25,000		
Total	3,178	1,113	1,174	35.0	36.9
Public	1,252	491	533	39.2	42.6
Arkansas	36	13	24	36.1	66.7
California	37	13	5	35.1	13.5
Colorado	28	7	7	25.0	25.0
Georgia	37	21	24	56.8	64.9
Illinois	90	29	31	32.2	34.4
Indiana	67	25	30	37.3	44.8
Iowa	46	20	33	43.5	71.7
Kansas	48	20	29	41.7	60.4
Louisville	42	20	22	47.6	52.4
Louisiana	41	17	16	41.5	39.0
Maryland	47	15	15	31.9	31.9
Michigan	71	23	20	32.4	28.2
Wayne	33	11	6	33.3	18.2
Minnesota	62	27	31	43.5	50.0
Nebraska	45	21	21	46.7	46.7

(Cont'd)

Table 14 (Cont'd)

Cincinnati	51	10	13	19.6	25.5
Ohio	44	11	15	25.0	34.1
Oklahoma	40	18	21	45.0	52.5
Oregon	45	17	16	37.8	35.6
South Carolina	25	14	16	56.0	64.0
Tennessee	83	35	38	42.2	45.8
Texas	67	24	26	35.8	38.8
Utah	23	11	9	47.8	39.1
Vermont	11	3	6	27.3	54.5
University of Virginia	38	17	16	44.7	42.1
Medical College of Virginia ...	58	32	31	55.2	53.4
Wisconsin	37	17	12	45.9	32.4
Private	1,926	622	641	32.3	33.3
Medical Evangelists	42	30	22	71.4	52.4
Southern California	35	13	5	37.1	14.3
Stanford	27	10	6	37.0	22.2
Yale	36	8	9	22.2	25.0
Georgetown	50	10	14	20.0	28.0
George Washington	35	18	12	51.4	34.3
Howard	21	1	0	4.8	0
Emory	39	11	20	28.2	51.3
Chicago Medical School	23	5	3	21.7	13.0
Northwestern	72	24	35	33.3	48.6
Loyola	49	18	7	36.7	14.3
Chicago University	31	9	10	29.0	32.3
Tulane	90	19	27	21.1	30.0
Johns Hopkins	32	12	13	37.5	40.6
Boston	28	11	4	39.3	14.3

(Cont'd)

Table 14 (Cont'd)

Harvard	68	14	30	20.6	44.1
Tufts	58	18	14	31.0	24.1
St. Louis	75	19	18	25.3	24.0
Washington	63	25	28	39.7	44.4
Creighton	34	10	8	29.4	23.5
Albany	18	5	3	27.8	16.7
Buffalo	46	16	17	34.8	37.0
Columbia	57	23	16	40.4	28.1
Cornell	45	16	17	35.6	37.8
New York Medical College	40	9	9	22.5	22.5
New York University	64	24	6	37.5	9.4
Long Island	51	15	9	29.4	17.6
Syracuse	34	11	16	32.4	47.1
Rochester	24	5	7	20.8	29.2
Duke	38	4	13	10.5	34.2
Bowman Gray	24	12	11	50.0	45.8
Western Reserve	52	9	12	17.3	23.1
Hahnemann	74	29	26	39.2	35.1
Jefferson	90	33	46	36.7	51.1
Temple	72	31	38	43.1	52.8
Pennsylvania	74	24	36	32.4	48.6
Woman's	9	2	3	22.2	33.3
Pittsburgh	45	14	16	31.1	35.6
McBarry	21	3	0	14.3	0
Vanderbilt	39	12	18	30.8	46.2
Southwestern	25	13	11	52.0	44.0
Baylor	24	13	12	54.2	50.0
Marquette	52	14	14	26.9	26.9

Table 15. Percentage distribution of graduates of medical colleges in private practice in various size communities, by size of community of prior residence, 1945 class

Size of community of prior residence	All sizes	Size of community of practice					
		500,000 and over	100,000-499,999	50,000-99,999	25,000-49,999	5,000-24,999	Under 2,500
Number of graduates	3,178 ^{1/}	626	738	340	356	675	144
All sizes	100.0	100.0	100.0	100.0	100.0	100.0	100.0
500,000 and over	24.6	63.6	10.2	17.4	18.5	16.9	18.0
100,000-499,999	19.2	9.4	44.6	11.2	15.4	12.3	9.5
50,000-99,999	9.6	5.3	6.4	37.4	5.1	7.6	7.1
25,000-49,999	9.3	4.6	7.9	7.1	27.8	7.6	7.1
5,000-24,999	19.2	9.9	14.9	14.1	18.5	36.1	18.0
2,500-4,999	5.4	2.4	5.6	1.5	5.3	5.8	8.2
Under 2,500	12.3	4.0	10.2	11.2	9.3	13.5	31.6

^{1/} Includes 5 graduates whose community of practice is not known and 13 whose community of prior residence is not known.

Table 16. Percentage distribution of graduates of medical colleges in private practice whose prior residence was in various size communities by size of community of practice, 1945 class

Size of community of prior residence	Number of graduates	All sizes	Size of community of practice					
			500,000 and over	100,000-499,999	50,000-99,999	25,000-49,999	5,000-24,999	Under 2,500
All sizes	3,178 ^{1/}	100.0	19.7	23.2	10.7	11.2	21.2	9.2
500,000 and over	783	100.0	50.8	9.6	7.5	8.4	14.6	6.8
100,000-499,999	610	100.0	9.7	53.9	6.2	9.0	13.6	4.6
50,000-99,999	304	100.0	10.8	15.5	41.8	5.9	16.8	6.9
25,000-49,999	294	100.0	9.9	19.7	8.2	33.7	17.3	7.1
5,000-24,999	611	100.0	10.1	18.0	7.9	10.8	39.9	8.7
2,500-4,999	173	100.0	8.7	23.7	2.9	11.0	22.5	13.9
Under 2,500	390	100.0	6.4	19.2	9.7	8.5	23.3	23.8

^{1/} Includes 5 graduates whose community of practice is not known and 13 whose community of prior residence is not known.

Table 17. Medical college graduates by type of practice, 1915, 1920, 1925, 1930, 1935, 1940, and 1945 classes

Type of practice	Year of graduation						
	1915	1920	1925	1930	1935	1940	1945
	Number of graduates						
Total	1,834	1,947	3,230	3,710	3,186	3,534	4,225
General practice	412	464	811	1,168	729	735	799
Special attention to specialty	653	786	1,307	1,405	643	490	246
Limited to specialty	751	682	1,097	1,126	1,768	2,260	3,128
Not practicing or type not specified	18	15	15	11	46	49	52
	Percentage distribution						
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
General practice	22.5	23.8	25.1	31.5	22.9	20.8	18.9
Special attention to specialty	35.6	40.4	40.5	37.9	20.2	13.9	5.8
Limited to specialty	40.9	35.0	34.0	30.4	55.5	63.9	74.1
Not practicing or type not specified	1.0	0.8	0.5	0.3	1.4	1.4	1.2

Table 18. Percent of graduates of each medical college who have limited practice to a specialty,
1915, 1920, 1925, 1930, 1935, 1940, and 1945 classes

Medical college	Year of graduation						
	1915	1920	1925	1930	1935	1940	1945
Total	40.9	35.0	34.0	30.2	55.5	64.0	74.0
Arkansas	27.3 1/2	-	23.8 1/2	27.3 1/2	79.2 1/2	44.4	57.5 1/2
Medical Evangelists	33.3 1/2	8.3 1/2	10.0	19.6	46.7	33.9	42.6
Southern California	2/2	2/2	2/2	2/2	78.3 1/2	71.4	75.0
Stanford	35.7 1/2	56.2 1/2	68.2 1/2	48.8	66.7	65.0	75.0
California	60.0 1/2	46.7 1/2	28.6	27.0	54.1	77.5	84.2
Colorado	42.9	40.0	42.3	33.3	54.8	72.5	78.0
Yale	71.4 1/2	31.2 1/2	48.6	69.8	65.6	86.5	85.7
Georgetown	47.6 1/2	22.2 1/2	34.5	16.4	37.8	56.7	75.0
George Washington	33.3 1/2	37.5 1/2	50.0	25.0	38.6	58.3	68.6
Howard	9.1 1/2	15.4 1/2	-	8.8	10.0 1/2	10.5 1/2	54.3 1/2
Emory	33.7	37.5 1/2	32.7	19.4	42.9	64.9	84.4
Georgia	25.0 1/2	46.2 1/2	21.1 1/2	32.0	61.9 1/2	50.0 1/2	58.1
Chicago Medical School	2/2	2/2	2/2	2/2	6.7	18.2	30.0 1/2
Northwestern	44.8	36.5	35.0	34.4	61.2	77.2	82.0
Loyola	2/2	2/2	23.3	13.6	39.6	62.0	53.6

(Cont'd)

Table 18 (Cont'd)

Chicago University	2/ 47.9	2/ 48.2	2/ 38.0	2/ 39.8	2/ 39.8	93.8 1/	88.5	83.0
Rush	34.0	27.7	31.3	26.4	39.8	55.3	59.5	70.1 2/
Illinois	46.2	29.0	32.9	25.0	26.4	50.0	64.7	60.2
Indiana	55.0 1/	35.6	55.9	28.0	25.0	45.9	56.3	65.6
Iowa	62.5 1/	30.8	25.0 1/	16.2	28.0	52.2	42.6	
Kansas	30.8	12.5 1/	34.8 1/	25.4	16.2	38.1	60.9	67.2
Louisville	2/	33.9	2/	34.3	25.4	48.0	62.5	73.7
Louisiana	76.7	76.2	36.4	75.8	34.3	58.3 1/	50.0	57.4
Tulane	36.7	50.0 1/	37.9	29.0	75.8	64.1	67.5	83.6
Johns Hopkins	36.7	50.0 1/	37.9	29.0	75.8	97.6	88.7	88.3
Maryland	65.6	37.5 1/	22.6	23.7	29.0	53.0	69.7	83.3
Boston	29.0	22.0	69.8	55.5	23.7	61.8	74.2	82.2
Harvard	62.9	37.9	30.4	24.7	55.5	79.6	86.1	89.5
Tufts	17.9	40.5	40.5	38.1	24.7	59.7	60.0	75.0
Michigan	40.0	31.0	22.7 1/	20.0	38.1	72.9	73.3	83.0
Wayne	40.0	44.8	45.8	25.3	20.0	48.8	73.0	70.8
Minnesota	54.5	22.4	24.6	24.4	25.3	42.9	59.0	70.8
St. Louis	32.1	48.6	50.0	41.4	24.4	42.4	57.6	71.8
Washington	20.0	20.0 1/	32.1	25.7	41.4	70.0	75.8	77.8
Creighton	28.6 1/	18.9	27.2	32.2	25.7	43.9	40.0	58.5 1/
Nebraska	39.5	43.8 1/	46.2 1/	-	32.2	64.9	54.0	70.0
Albany	35.7	23.8	18.4	17.5	-	52.2 1/	65.2 1/	85.2 1/
Buffalo	46.8	36.8	35.1	30.1	17.5	52.2	83.3	70.5
Columbia	60.0 1/	37.9	36.6	42.9	30.1	69.8	77.5	89.8
Cornell					42.9	82.6	80.8	90.9

(Cont'd)

Table 18 (Cont'd)

New York Medical College	2/	6.2 1/	13.5	47.2	50.0	86.8
New York University	39.4	21.6	17.0	64.3	75.0	88.4
Long Island	28.8	12.3	7.0	55.9	61.2	83.6
Syracuse	41.7 1/	22.9	17.9	37.8	59.0	78.0
Rochester	2/	2/	63.6 1/	51.4	80.5	87.2
Duke	2/	2/	2/	75.9	82.6	94.3
Bowman Gray	2/	2/	2/	2/	2/	69.0 1/
Cincinnati	2/	42.1	46.8	76.2	65.2	71.7
Western Reserve	43.3	37.5	40.4	61.9	72.7	87.5
Ohio	45.7	21.0	19.1	53.7	70.6	69.8
Oklahoma	30.8 1/	47.4 1/	17.1	54.1	50.0	61.2
Oregon	30.0 1/	38.1	45.7	68.8	63.9	73.7
Hahnemann	21.4 1/	11.4	10.6	26.3	39.7	62.5
Jefferson	38.1	17.0	29.2	51.6	58.2	61.6
Temple	2/	13.8	11.4	60.8	58.2	74.5
Pennsylvania	52.2	40.0	34.0	66.0	72.8	89.4
Woman's	27.8 1/	17.6 1/	-	52.9 1/	75.0 1/	73.3 1/
Pittsburgh	33.3 1/	25.0	16.7	41.5	55.2	69.8
South Carolina	42.1 1/	46.2	44.4	53.8	50.0	77.8
Tennessee	39.5	40.4	35.0	49.0	54.8	56.2
McHarry	-	-	4.0	23.1 1/	23.5 1/	40.5 1/
Vanderbilt	42.4	40.0	57.6	58.8	79.1	84.1
Southwestern	2/	2/	2/	2/	2/	69.7 1/
Texas	51.7	50.0	28.1	40.8	62.7	76.7
Baylor	30.0 1/	32.0	26.8	43.5	47.6	44.8 1/

(Cont'd)

Table 18 (Cont'd)

Utah	$\frac{2}{37.5}$	$\frac{2}{23.8}$	$\frac{2}{33.3}$	$\frac{2}{47.8}$	$\frac{2}{55.2}$	$\frac{2}{61.3}$
Vermont	$\frac{1}{65.0}$	$\frac{1}{73.1}$	$\frac{1}{53.3}$	$\frac{1}{54.3}$	$\frac{1}{87.8}$	$\frac{1}{86.4}$
University of Virginia	$\frac{1}{30.2}$	$\frac{1}{37.5}$	$\frac{1}{37.8}$	$\frac{1}{54.7}$	$\frac{1}{58.5}$	$\frac{1}{68.1}$
Medical College of Virginia	$\frac{2}{25.0}$	$\frac{2}{54.5}$	$\frac{2}{6.9}$	$\frac{2}{64.1}$	$\frac{2}{68.4}$	$\frac{2}{81.1}$
Wisconsin						
Marquette						

 $\frac{1}{}$ Percent based on less than 25. $\frac{2}{}$ Not included in study for this year.

Table 19. Graduates of medical colleges in private practice by size of community of practice and type of practice, 1935, 1940, and 1945 classes

Year of graduation and size of community of practice	Number of graduates			Percentage distribution		
	General practice	Special attention	Limited specialty	General practice	Special attention	Limited specialty
1935:						
Total	695	581	1,332	100.0	100.0	100.0
500,000 and over	127	103	445	18.6	17.1	33.4
100,000-499,999	81	85	383	12.2	14.2	28.8
50,000-99,999	55	42	157	7.5	7.8	11.8
25,000-49,999	33	62	151	5.9	9.7	11.3
5,000-24,999	152	166	164	22.3	28.8	12.3
2,500-4,999	77	50	6	10.4	9.4	0.4
Under 2,500	170	73	25	23.1	13.0	1.9
Unknown	0	0	1	-	-	0.1
1940:						
Total	666	439	1,615	100.0	100.0	100.0

(Cont'd)

Table 19 (Cont'd)

500,000 and over	82	81	500	14.6	15.1	31.0
100,000-499,999	87	57	445	13.2	12.6	27.5
50,000-99,999	57	40	202	8.5	9.3	12.5
25,000-49,999	50	46	232	7.7	10.7	14.4
5,000-24,999	163	123	194	24.1	29.6	12.0
2,500-4,999	73	42	10	10.4	10.4	0.6
Under 2,500	154	50	32	21.5	12.3	2.0
Unknown	0	0	0	-	-	-
1945:						
Total	754	210	2,194	100.0	100.0	100.0
500,000 and over	76	31	519	10.1	14.8	23.7
100,000-499,999	82	23	620	10.9	11.0	28.3
50,000-99,999	44	19	277	5.8	9.0	12.6
25,000-49,999	35	21	300	4.6	10.0	13.7
5,000-24,999	207	61	404	27.5	29.0	18.4
2,500-4,999	98	24	22	13.0	11.4	1.0
Under 2,500	212	31	51	28.1	14.8	2.3
Unknown	0	0	1	-	-	-

Table 20. Medical college graduates practicing in individual cities of 500,000 $\frac{1}{2}$ and more population who have limited practice to a specialty, 1925, 1930, 1935, 1940, and 1945 classes

City of practice	Year of graduation				
	1925	1930	1935	1940	1945
Number of limited specialists practicing in specified city					
Total	409	380	543	681	792
Baltimore	24	31	27	27	32
Boston	41	35	29	51	48
Buffalo	7	5	10	20	31
Chicago	60	34	44	55	59
Cincinnati	-	-	14	16	20
Cleveland	13	19	25	28	41
Detroit	33	9	18	31	30
Houston	-	-	10	19	29
Los Angeles	27	22	46	58	54
Milwaukee	6	9	16	9	21
Minneapolis	-	-	12	10	23
New Orleans	-	-	14	28	41
New York	100	106	143	163	168
Philadelphia	19	27	47	58	73
Pittsburgh	14	11	15	14	32
St. Louis	17	13	21	30	21
San Francisco	27	21	21	31	39
Washington	-	-	31	33	30

Table 20 (Cont'd)

Specialists as percentage of all graduates practicing in specified city					
Total	40.1	38.3	68.9	78.3	83.3
Baltimore	68.6	79.5	69.2	75.0	86.5
Boston	75.9	72.9	90.6	94.4	82.8
Buffalo	26.9	21.7	58.8	95.2	83.8
Chicago	43.2	31.2	61.1	67.1	74.7
Cincinnati	-	-	82.4	69.6	80.0
Cleveland	40.6	46.3	73.5	82.4	93.2
Detroit	40.2	22.5	51.4	77.5	62.5
Houston	-	-	55.6	82.6	85.3
Los Angeles	51.9	48.9	83.6	76.3	91.5
Milwaukee	23.1	27.3	66.7	69.2	80.8
Minneapolis	-	-	85.7	90.9	79.3
New Orleans	-	-	82.4	87.5	93.2
New York	29.4	27.0	62.4	80.7	88.9
Philadelphia	24.7	38.0	67.1	71.6	83.9
Pittsburgh	43.8	37.9	62.5	77.8	86.5
St. Louis	51.5	38.2	80.8	76.9	51.2
San Francisco	58.7	48.8	80.8	77.5	90.7
Washington	-	-	79.5	73.3	88.2

1/ Communities were classified by 1930 population for 1925 and 1930 graduates and by 1950 population for 1935, 1940, and 1945 graduates.

Table 21. Graduates of medical colleges in private practice by size of community of prior residence and type of practice, 1935, 1940, and 1945 classes

Year of graduation and size of community of prior residence	Number of graduates			Percentage distribution			
	General practice	Special attention	Limited specialty	Total	General practice	Special attention	Limited specialty
1935: Total	695	581	1,332	100.0	29.2	19.7	51.1
500,000 and over	171	158	430	100.0	25.6	17.8	56.6
100,000-499,999	105	81	267	100.0	25.8	15.2	59.0
50,000-99,999	45	34	125	100.0	23.5	15.2	61.3
25,000-49,999	32	51	98	100.0	21.6	24.3	54.1
5,000-24,999	111	90	171	100.0	31.7	22.3	46.0
2,500-4,999	43	41	42	100.0	36.5	30.2	33.3
Under 2,500	133	88	121	100.0	40.9	23.7	35.4
Unknown	55	38	78	-	-	-	-
1940: Total	666	439	1,615	100.0	27.2	13.4	59.4

(Cont'd)

Table 21 (Cont'd)

500,000 and over	133	106	438	100.0	23.5	11.8	64.7
100,000-499,999	116	51	285	100.0	27.4	9.5	63.1
50,000-99,999	45	27	147	100.0	22.8	10.1	67.1
25,000-49,999	69	39	166	100.0	27.4	12.0	60.6
5,000-24,999	123	82	259	100.0	29.1	15.1	55.8
2,500-4,999	50	27	70	100.0	36.7	15.7	47.6
Under 2,500	99	74	155	100.0	32.3	20.4	47.3
Unknown	31	33	95	-	-	-	-
1945: Total	754	210	2,194	100.0	23.9	6.6	69.5
500,000 and over	132	58	590	100.0	16.9	7.4	75.7
100,000-499,999	110	28	462	100.0	18.3	4.7	77.0
50,000-99,999	72	15	216	100.0	23.8	4.9	71.3
25,000-49,999	66	15	213	100.0	22.5	5.1	72.4
5,000-24,999	161	43	403	100.0	26.5	7.1	66.4
2,500-4,999	68	18	87	100.0	39.3	10.4	50.3
Under 2,500	141	32	216	100.0	36.3	8.2	55.5
Unknown	4	1	7	-	-	-	-

Table 22. Percentage distribution of medical college graduates who have limited practice to a specialty by specialty, 1915, 1920, 1925, 1930, 1935, 1940, and 1945 classes

Specialty	Year of graduation						
	1915	1920	1925	1930	1935	1940	1945
Number of specialists	715	682	1,097	1,126	1,768	2,260	3,128
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Eye, ear, nose, and throat	22.5	18.2	16.7	13.0	11.3	8.6	6.5
Internal medicine	18.1	18.3	17.3	17.8	19.4	23.8	24.1
Surgery	20.2	15.5	18.5	17.7	20.0	24.0	21.1
Pediatrics	6.0	11.3	9.9	7.5	6.4	6.9	9.2
Gynecology and obstetrics	5.9	6.7	6.8	5.6	10.0	10.0	8.4
Neuropsychiatry	4.7	6.6	5.8	12.5	8.1	6.5	8.2
Genito-urinary	5.3	5.9	4.7	4.1	3.4	3.1	2.9
Laboratory and radiology	7.6	8.6	8.4	10.8	7.9	8.6	9.6
Public health	3.5	3.2	4.6	4.1	3.6	1.2	0.8
Industrial (medicine and surgery)	2.4	1.3	1.4	0.7	1.1	0.5	0.5
Syphilology and dermatology	0.9	2.2	2.8	1.9	2.7	2.0	2.0
All other ^{1/}	2.9	2.0	3.0	4.4	6.1	4.8	6.7

^{1/} Includes a few specialists who did not specify specialty.

Table 23. Percentage distribution of limited specialists and of those giving special attention to a specialty by specialty, 1935, 1940, and 1945 classes

Specialty	Limited specialty			Special attention		
	1935	1940	1945	1935	1940	1945
Number of specialists	1,768	2,260	3,128	643	490	246
Total	100.0	100.0	100.0	100.0	100.0	100.0
Allergy .....	.7	.3	.2	1.1	1.0	.8
Anesthesiology	2.2	3.0	4.0	3.4	4.1	4.5
Bacteriology .....	.2	$\frac{1}{2}$	$\frac{1}{2}$	-	-	-
Cardiovascular disease .....	.5	.3	.2	2.6	1.9	2.0
Dermatology and syphilology	2.7	2.0	2.0	.8	1.4	.8
Ear, nose, and throat	3.1	3.1	2.5	1.7	.4	-
Eye, ear, nose, and throat	3.7	1.5	.6	.4	.2	.4
Gastroenterology .....	.3	.2	.2	.6	1.0	-
Gynecology, gynecology and obstetrics	9.4	9.3	8.3	8.4	12.5	11.0
Industrial medicine and surgery	1.1	.5	.5	3.9	2.3	3.3
Internal medicine	18.6	23.3	23.7	11.5	16.5	22.8

(Cont'd)

Table 23 (Cont'd)

Neurological surgery .....	.7	.9	1.1	-	-	.4
Neurology .....	.2	.1	.4	-	-	.4
Neuropsychiatry	3.0	1.8	1.3	.1	.1	.2
Obstetrics .....	.6	.7	.1	6.5	5.1	.6
Ophthalmology	4.5	4.0	3.4	.9	1.4	.8
Orthopedic surgery	4.1	5.2	3.8	1.8	.6	.8
Pathology, clinical pathology	2.0	3.5	3.7	.3	7.6	.8
Pediatrics	6.5	6.9	9.2	4.3	.8	6.5
Physical medicine & rehabilitation .....	.3	.3	.3	-	-	-
Plastic surgery .....	.5	.6	.6	-	-	.4
Proctology	1.0	.3	.1	1.4	.4	.8
Psychiatry	4.9	4.6	6.5	.9	1.0	.8
Public health	3.6	1.2	.8	-	-	.8
Pulmonary disease	1.4	.7	.5	3.1	1.4	.8
Radiology	5.7	5.0	5.9	.8	.4	.8
Surgery	13.0	16.4	13.1	42.1	35.5	30.5
Thoracic surgery .....	.6	.7	2.4	-	-	.4
Urology	3.4	3.1	2.9	.8	.8	-
All other	1.3	.4	1.4	1.4	.6	2.9
Not reported .....	.2	.1	.3	1.2	1.9	.4

1/ Less than .05 percent.

Table 24. Medical college graduates by method of practice, 1935, 1940, and 1945 classes

Method of practice	Number of graduates			Percentage distribution		
	1935	1940	1945	1935	1940	1945
Total	3,186	3,534	4,225	100.0	100.0	100.0
Individual	2,356	2,347	2,000	74.0	66.4	47.3
Partnership	27	57	743	0.8	1.6	17.6
Group	284	395	403	8.9	11.2	9.5
State or local health dept.	52	37	34	1.6	1.0	0.8
Teaching and/or research	73	174	255	2.3	5.0	6.0
Armed Forces 1/	93	128	208	2.9	3.6	4.9
Other Federal Government	96	115	150	3.0	3.3	3.6
Hospital administration	19	12	5	0.6	0.3	0.1
Other hospital, clinic	63	78	160	2.0	2.2	3.8
Industrial practice	50	37	28	1.6	1.0	0.7
Resident, fellow	26	106	167	0.8	3.0	4.0
All other	28	21	35	0.9	0.6	0.8
Not in practice	15	21	36	0.5	0.6	0.9
Not specified	4	6	1	0.1	0.2	2/

1/ Includes Army, Navy, Air Force, and U. S. Public Health Service.

2/ Less than 0.05 percent.

Table 25. Medical college graduates with various methods of practice by type of practice, 1945 class

Method of practice	Type of practice		
	General practice	Special attention	Limited specialty
	Number of graduates		
All methods	799	246	3,128
Individual	563	139	1,298
Partnership	148	51	544
Group	44	22	337
State or local health department	2	0	32
Teaching and/or research	4	1	243
Armed Forces <u>1</u> /	18	17	170
Other Federal Government	3	2	144
Hospital administration	1	0	4
Other hospital, clinic	8	8	144
Industrial practice	3	4	21
Resident, fellow	0	0	167
All other	4	2	24
Not specified	1	0	0

(Cont'd)

Table 25 (Cont'd)

	Percentage distribution		
	100.0	100.0	100.0
All methods			
Individual	70.5	56.5	41.5
Partnership	18.5	20.7	17.4
Group	5.5	9.0	10.8
State or local health department	0.2	-	1.0
Teaching and/or research	0.5	0.4	7.8
Armed Forces 1/	2.3	6.9	5.4
Other Federal Government	0.4	0.8	4.6
Hospital administration	0.1	-	0.1
Other hospital, clinic	1.0	3.3	4.6
Industrial practice	0.4	1.6	0.7
Resident, fellow	-	-	5.3
All other	0.5	0.8	0.8
Not specified	0.1	-	-
1/ Includes Army, Navy, Air Force, and U. S. Public Health Service.			

Table 26. Percent of graduates of each medical college in private practice, 1930, 1935, 1940, and 1945 classes

Medical college	Year of graduation			
	1930	1935	1940	1945
Total	77.6	82.3	77.4	75.2
Arkansas	45.5 1/2	75.0 1/2	75.6	90.0
Medical Evangelists	64.3	70.0	72.6	68.9
Southern California	2/	78.3 1/2	77.1	87.5
Stanford	81.4	83.3	82.5	75.0
California	83.8	75.7	75.0	64.9
Colorado	55.6	80.6	70.0	68.3
Yale	60.5	62.5	59.5	73.5
Georgetown	95.1	91.1	85.0	83.3
George Washington	78.1	84.1	61.1	68.6
Howard	91.2	95.0 1/2	89.5 1/2	60.0
Emory	72.2	91.4	81.1	86.7
Georgia	64.0	90.5 1/2	81.2 1/2	86.0
Chicago Medical School	2/	90.0	81.8	76.7
Northwestern	74.2	78.6	81.2	80.9
Loyola	89.8	85.4	82.0	87.5

(Cont'd)

Table 26 (Cont'd)

Chicago University	68.8 $\frac{1}{2}$	53.8	66.0
Rush	89.4	79.7	$\frac{2}{76.9}$
Illinois	82.4	67.6	85.9
Indiana	86.9	80.3	71.9
Iowa	78.3	85.2	
Kansas	85.7	84.8	78.7
Louisville	82.0	81.2	73.7
Louisiana	95.8 $\frac{1}{2}$	88.1	75.9
Tulane	76.6	83.1	81.8
Johns Hopkins	61.9	69.8	53.3
Maryland	86.4	77.3	78.3
Boston	76.5	77.4	62.2
Harvard	83.5	67.8	59.6
Tufts	83.9	80.0	90.6
Michigan	75.7	68.9	67.0
Wayne	81.4	75.7	68.8
Minnesota	84.1	77.1	69.7
St. Louis	84.7	74.2	72.8
Washington	85.0	78.8	77.8
Creighton	87.8	90.0	82.9
Nebraska	77.2	78.0	75.0
Albany	87.0	82.6 $\frac{1}{2}$	66.7
Buffalo	78.3	77.8	75.4
Columbia	87.3	66.2	64.8
Cornell	84.8	71.2	68.2

(Cont'd)

Table 26 (Cont'd)

New York Medical College	90.4	91.7	87.5	75.5
New York University	96.6	90.5	75.0	74.4
Long Island	97.2	83.0	77.6	76.1
Syracuse	92.3	91.9	89.7	82.9
Rochester	81.8 $\frac{1}{2}$	73.0	68.3	51.1
Duke	$\frac{2}{2}$	86.2	67.4	71.7
Bowman Gray	$\frac{2}{2}$	$\frac{2}{2}$	$\frac{2}{2}$	82.8
Cincinnati	74.4	83.3	80.4	85.0
Western Reserve	71.2	88.1	84.1	72.2
Ohio	78.7	81.5	72.5	83.0
Oklahoma	70.7	86.5	82.4	81.6
Oregon	68.6	75.0	77.8	78.9
Hahnemann	89.4	86.0	82.1	84.1
Jefferson	80.2	89.5	86.7	80.4
Temple	88.6	86.3	79.7	76.6
Pennsylvania	79.4	81.4	78.6	71.2
Woman's	70.0 $\frac{1}{2}$	76.5 $\frac{1}{2}$	75.0 $\frac{1}{2}$	60.0 $\frac{1}{2}$
Pittsburgh	88.9	87.8	86.2	71.4
South Carolina	77.8	80.8	93.3	69.4
Tennessee	73.3	88.2	75.8	86.5
Meharry	92.0	76.9 $\frac{1}{2}$	100.0 $\frac{1}{2}$	56.8
Vanderbilt	54.5	64.7	79.1	88.6
Southwestern	$\frac{2}{2}$	$\frac{2}{2}$	$\frac{2}{2}$	75.8
Texas	81.3	87.8	83.6	77.9
Baylor	80.3	89.1	88.1	82.8

(Cont'd)

Table 26 (Cont'd)

Utah	<u>2/</u> 90.5 <u>1/</u>	<u>2/</u> 73.9 <u>1/</u>	<u>2/</u> 72.4	<u>2/</u> 74.2
Vermont	65.9	80.0	68.3	50.0 <u>1/</u>
University of Virginia	69.3	73.6	70.7	82.6
Medical College of Virginia	71.4	84.6	81.6	80.6
Wisconsin	85.7	86.5	77.5	69.8
Marquette				82.5

1/ Percent based on less than 25.2/ Not included in study for this year.

Table 27. Medical college graduates in private and nonprivate practice by type of practice, 1935, 1940, and 1945 classes

Type of practice	Year of graduation					
	1935			1940		
	Private practice	Nonprivate practice	Private practice	Nonprivate practice	Private practice	Nonprivate practice
	Number of graduates ^{1/}					
Total	2,640	526	2,742	763	3,178	1,011
General practice	701	27	672	63	755	44
Special attention	592	51	446	42	212	34
Limited specialty	1,347	418	1,624	631	2,211	917
Not specified	0	30	0	27	0	16
	Percentage distribution					
Total	100.0	100.0	100.0	100.0	100.0	100.0
General practice	26.6	5.1	24.5	8.3	23.7	4.3
Special attention	22.4	9.7	16.3	5.5	6.7	3.4
Limited specialty	51.0	79.5	59.2	82.7	69.6	90.7
Not specified	-	5.7	-	3.5	-	1.6

^{1/} Excludes graduates not in practice and those who did not specify whether they were in private or nonprivate practice.

Table 28. Percentage distribution of medical college graduates by kind of salaried position,
1915, 1920, 1925, 1930, 1935, 1940, and 1945 classes

Kind of salaried position	Year of graduation						
	1915	1920	1925	1930	1935	1940	1945
Number of graduates <u>1/</u>	1,834	1,947	2,948	3,427	3,171	3,513	4,189
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Full time	15.2	17.6	16.7	28.1	16.9	23.0	26.8
Part time	16.4	19.9	19.8	19.8	14.1	14.9	16.1 <u>2/</u>
None	68.4	62.5	63.5	52.1	69.0	62.1	57.1

1/ Excludes those not in practice.

2/ For the 1945 class, graduates were not asked whether part-time positions were salaried or nonsalaried.

Table 29. Percentage distribution of medical college graduates with full-time salaried positions by type of position, 1915, 1920, 1925, 1930, 1935, 1940, and 1945 classes

Type of salaried position	Year of graduation						
	1915	1920	1925	1930	1935	1940	1945
Number with full-time salaried positions	278	342	570	1,055	535	808	1,124
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Hospitals and institutions	22.3	28.9	25.6	27.0	18.5	24.0	23.9
Tuberculosis sanatoria	4.3	3.2	4.9	3.7	1.9	1.0	1.0
Mental hospitals	1/	3/	3.9	4.6	2.2	1.5	3.0
All other	18.0	25.7	16.8	18.7	14.4	21.5	19.9
Medical college teaching and/or research	9.0	14.9	9.5	7.9	11.6	15.6	19.5
Public health	10.4	11.4	10.9	8.3	15.3	7.1	6.5
U. S. Public Health Service	5.0	2.0	2.1	1.8	3.2	3.0	3.5
State and local health department	3.2	5.3	5.3	3.4	9.9	3.2	2.2
Other and unspecified	2.2	4.1	3.5	3.1	2.2	0.9	0.8

(Cont'd)

Table 29 (Cont'd)

Federal Government	29.1	7.9	10.7	16.3	32.1	27.0	28.4
Armed forces	21.9	3.2	7.7	8.4	14.2	12.9	15.0
Veterans Administration	7.2	3.5	1.9	1.6	16.8	13.2	12.9
Other	-	1.2	1.1	6.3	1.1	0.9	0.5
Industrial	7.5	6.7	8.9	4.2	8.2	4.2	2.5
Assistant to other physician	2.9	7.0	4.6	5.6	0.2	1.6	0.9
Group practice	4.7	10.8	9.8	5.1	9.2	13.2	10.0
Fellowship	-	.3	3.7	4.0	-	0.4	1.9
All other	12.3	9.5	14.4	20.8	4.9	6.9	6.3
Not specified	1.8	2.6	1.9	.8	-	-	0.1

1/ In 1915 and 1920 physicians employed in mental hospitals were classified in "other hospital positions."

Table 30. Medical college graduates with full-time and part-time positions by type of practice, 1935, 1940, and 1945 classes

Type of practice	Full-time salaried positions			Part-time positions Salaried		
	1935	1940	1945	1935	1940	1945 <u>1/</u>
Number of graduates						
Total	535	808	1,124	446	522	673
General practice	33	67	52	103	91	84
Special attention	44	48	34	77	57	41
Limited specialty	428	669	1,022	266	373	548
Not specified	30	24	16	0	1	0
Percentage distribution						
Total	100.0	100.0	100.0	100.0	100.0	100.0
General practice	6.2	8.3	4.7	23.1	17.4	12.5
Special attention	8.2	5.9	3.0	17.3	10.9	6.1
Limited specialty	80.0	82.8	90.9	59.6	71.5	81.4
Not specified	5.6	3.0	1.4	-	0.2	-

1/ For 1945 graduates, salary status of part-time positions was not obtained.

Table 31. Medical college graduates with full-time and part-time positions who have limited practice to various specialties, 1935, 1940, and 1945 classes

Specialty	Full-time salaried positions			Part-time positions		
				Salaried		
	1935	1940	1945	1935	1940	1945 1/
Number of graduates						
Total	428	669	1,022	266	373	548
Eye, ear, nose, and throat	17	37	36	28	27	39
Internal medicine	62	149	226	73	124	180
Surgery	46	140	212	58	83	99
Pediatrics	10	25	71	18	30	49
Obstetrics and gynecology	11	30	39	15	32	39
Neuropsychiatry	66	72	117	27	32	73
Genito-urinary	6	15	18	8	4	11
Laboratory and radiology	66	107	159	19	18	23
Public health	64	27	24	0	0	0
Industrial (medicine & surgery) ..	16	10	15	0	1	1
Syphilology and dermatology	9	10	9	9	13	17
All other 2/	55	47	96	11	9	17

(Cont'd)

Table 31 (Cont'd)

	Percentage distribution					
	100.0	100.0	100.0	100.0	100.0	100.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Eye, ear, nose, and throat	4.0	5.5	3.5	10.5	7.2	7.1
Internal medicine	14.5	22.3	22.1	27.5	33.2	32.9
Surgery	10.7	20.9	20.7	21.8	22.3	18.1
Pediatrics	2.3	3.7	6.9	6.8	8.0	8.9
Obstetrics and gynecology	2.6	4.5	3.8	5.6	8.6	7.1
Neuropsychiatry	15.4	10.8	11.4	10.2	8.6	13.3
Genito-urinary	1.4	2.3	1.8	3.0	1.1	2.0
Laboratory and radiology	15.4	16.0	15.6	7.1	4.8	4.2
Public health	15.0	4.0	2.4	-	-	-
Industrial (medicine and surgery)	3.7	1.5	1.5	-	0.3	0.2
Syphilology and dermatology	2.1	1.5	0.9	3.4	3.5	3.1
All other	12.9	7.0	9.4	4.1	2.4	3.1

1/ For 1945 graduates, salary status of part-time positions was not obtained.

2/ Includes a few limited specialists who did not specify specialty.

Table 32. Internship and residency training of medical college graduates
by type of practice, 1935, 1940, and 1945 classes

Internship and residency training	Type of practice									
	General			Special attention			Limited specialty			
	1935	1940	1945	1935	1940	1945	1935	1940	1945	
Number of graduates	729	735	799	643	490	246	1,768	2,260	3,128	
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
With internship	99.7	99.7	99.9	100.0	100.0	100.0	99.6	99.8	99.9	
With residency	28.9	34.5	29.3	49.0	60.8	61.4	84.3	93.0	96.9	
No residency	70.8	65.2	70.6	51.0	39.2	38.6	15.3	6.8	3.0	
Rotating or general internship	90.9	93.3	91.4	89.4	92.0	83.7	82.2	81.8	78.9	
With residency	26.0	31.4	26.8	42.8	55.3	50.8	68.3	76.3	76.3	
No residency	64.9	61.9	64.6	46.6	36.7	32.9	13.9	5.5	2.6	
Other internship	8.8	6.4	8.5	10.6	8.0	16.3	17.4	18.0	21.0	
With residency	2.9	3.1	2.5	6.2	5.5	10.6	16.0	16.7	20.6	
No residency	5.9	3.3	6.0	4.4	2.5	5.7	1.4	1.3	0.4	

Table 33. Graduate training of medical college graduates who have limited practice to a specialty, 1935, 1940, and 1945 classes

Type of graduate training	Year of graduation		
	1935	1940	1945
Total	100.0	100.0	100.0
Internship in specialty only	0.6	0.2	0.1
Residency in specialty	71.9	85.8	90.4
Other residency	7.4	3.9	1.0
Type of residency not specified	4.7	3.4	5.1
Other training in specialty only	12.2	4.6	1.7
No training in specialty	3.2	2.1	1.7

Table 34. Medical college graduates with residency training by year of completion and length of training, 1945 class

Year of completion	Total	Years of residency training							
		Less than 1	1 less than 2	2 less than 3	3 less than 4	4 less than 5	5 less than 6	6 or more	Not reported
Total	3,432	55	372	763	1,217	573	233	79	140
After 1956 .	9	0	0	0	6	2	0	1	0
1956	15	3	0	1	2	6	1	2	0
1955	44	0	4	5	8	9	7	11	0
1954	179	2	6	16	36	40	39	39	0
1953	355	1	8	23	75	103	131	13	1
1952	598	3	7	43	199	310	23	13	1
1951	955	1	18	166	706	34	30	0	0
1950	565	3	49	372	75	66	0	0	0
1949	327	11	162	50	103	1	0	0	0
1948	146	9	48	86	3	0	0	0	0
1947	76	12	64	0	0	0	0	0	0
Not reported	163	10	6	1	4	2	2	0	138

Table 35. Medical college graduates with residency training by pattern of training, 1935, 1940, and 1945 classes

Pattern of training	Year of graduation		
	1935	1940	1945
Number with known dates of training	1,852	2,480	3,252
Total	100.0	100.0	100.0
No interruption in training	78.9	42.1	13.3
Some interruption	21.1	57.9	86.7
Less than 5 years interruption	7.9	41.7	81.4
5 years or more interruption	13.2	16.2	5.3

Table 36. Medical college graduates with military service by branch and length of service, 1945 class

Branch of service	Total	Years of service							
		Less than 1	1 less than 2	2 less than 3	3 less than 4	4 less than 5	5 less than 6	6 or more	Not reported
Total	3,824	45	949	2,158	226	185	72	164	25
Army	2,310	24	680	1,368	83	81	20	43	11
Navy	958	13	167	524	97	66	35	49	7
Air Force	283	3	93	162	8	3	1	11	2
U.S. Public Health Service ..	101	3	3	43	13	6	6	26	1
Army and Air Force	93	1	2	42	13	16	4	13	2
Army and Public Health Service	46	0	1	13	6	7	4	14	1
All other combinations	32	1	3	6	6	6	2	8	0
Not reported	1	0	0	0	0	0	0	0	1

Table 37. Medical college graduates who have limited practice to various specialties and who hold an American Board Certificate, 1935, 1940 and 1945 classes

Specialty	Number with a certificate			Percent of limited specialists in specialty		
	1935	1940	1945	1935	1940	1945
Total	1,094	918	1,446	61.9	40.6	46.2
Eye, ear, nose, and throat	144	102	143	72.0	52.6	70.1
Internal medicine	209	186	264	60.9	34.6	35.0
Surgery	217	204	258	61.5	37.6	39.2
Pediatrics	69	87	183	60.5	55.8	63.5
Gynecology and obstetrics	105	60	68	59.7	26.7	25.8
Neuropsychiatry	97	68	147	67.4	46.3	57.2
Genito-urinary	43	9	9	71.7	13.0	9.8
Laboratory and radiology	110	135	246	78.6	69.6	81.7
Public health	30	6	7	46.9	21.4	29.2
Industrial	1	0	0	5.3	-	-
Syphilology and dermatology ...	29	31	47	61.7	67.4	77.0
All other	40	30	74	37.0	27.5	35.6

Table 38. Medical college graduates with certificates from various American Boards,
1935, 1940, and 1945 classes

American Board	Number of graduates			Percentage distribution		
	1935	1940	1945	1935	1940	1945
Total	1,104 <u>1/</u>	922 <u>2/</u>	1,453 <u>3/</u>	100.0	100.0	100.0
Pediatrics	71	88	191	6.4	9.5	13.1
Psychiatry and Neurology	96	68	144	8.7	7.4	9.9
Orthopedic Surgery	52	46	39	4.7	5.0	2.7
Dermatology and Syphilology	28	31	47	2.5	3.4	3.2
Radiology	86	85	167	7.8	9.2	11.5
Urology	43	9	8	3.9	1.0	0.6
Gynecology and obstetrics	103	60	67	9.3	6.5	4.6
Internal medicine	218	186	267	19.7	20.2	18.4
Pathology	26	49	80	2.4	5.3	5.5
Ophthalmology	64	55	85	5.8	6.0	5.9
Otolaryngology	79	46	61	7.2	5.0	4.2
Surgery	136	147	196	12.3	15.9	13.5
Anesthesiology	24	27	62	2.2	2.9	4.3
Plastic Surgery	3	1	6	0.3	0.1	0.4
Neurological Surgery	7	5	10	0.6	0.5	0.7
Physical Medicine & Rehabilitation ..	5	3	6	0.4	0.3	0.4
Preventive Medicine	35	6	5	3.2	0.6	0.3
Proctology	3	1	0	0.3	0.1	-
Thoracic Surgery	4	0	10	0.4	-	0.7
Certificates from two Boards	18	7	2	1.6	0.8	0.1
Not specified	3	2	0	0.3	0.2	-

1/ Includes 10 graduates who are not limited specialists

2/ Includes 4 graduates who are not limited specialists.

3/ Includes 7 graduates who are not limited specialists.

Survey of 1945 Graduates of Medical Colleges in the United States

*Please do not write
in this column*

1. Name _____ Last _____ First _____ Middle _____
 2. Place of practice _____ City _____ State _____ 3. 1 ☐ Male 2 ☐ Female
 4. Medical college _____ 5. Year of Birth _____
 6. Residence at time of entering medical college _____ City _____ State _____

7. Present status (check principal one)

- 1 ☐ In private practice
 2 ☐ Resident or fellow
 3 ☐ With a salaried position

8. Type of practice

(check all that apply)

- Individual _____ Full Time ☐ Part Time ☐
 Partnership _____
 Group practice _____
 State or local health dept. _____
 Teaching and/or research _____
 Hospital administration _____
 Other hospital position _____
 Medical administration _____
 Industrial practice _____

4 ☐ Not engaged in any branch of medicine

☐ Other _____ Specify _____

- U. S. Army _____ Full Time ☐ Part Time ☐
 U. S. Navy _____
 U. S. Air Force _____
 U. S. P. H. S. _____
 U. S. Veterans Administration _____
 Other U. S. Government _____

Specify agency

Other _____ ☐ ☐

9. Specialization (check only one)

- 1 ☐ General practice
 2 ☐ General practice with special attention
 3 ☐ Practice limited to a specialty
 Other ☐

Specialty _____
 Specialty _____

10. Do you hold a certificate from an American Board?

Specialty _____ Specify _____ 1 ☐ Yes 2 ☐ No

See Over

11. Full-time graduate training (include only training lasting 6 months or more)

Type or Field	Name of Institution	City	State	Dates	
				From	To
Internship.....					
Residency or fellowship.....					
Other (specify).....					

12. Military service (check branch and give length of service)

	Years	Months	Years	Months
1 <input type="checkbox"/> U. S. Army.....				
2 <input type="checkbox"/> U. S. Navy.....				
3 <input type="checkbox"/> U. S. Air Force.....				
			4 <input type="checkbox"/> U. S. Public Health Service	
			<input type="checkbox"/> Other (specify).....	

13. Check the most important reasons for locating in your present place of practice.

- 1 ☐ Went to medical school here
 2 ☐ Took internship here
 3 ☐ Took residency here
 4 ☐ Home community
 5 ☐ Community was seeking a physician
 6 ☐ Offered salaried position
 7 ☐ Climate
☐ Other (specify).....

14. Remarks.....



